

Number of Entries Requested
 Single-Entry
 Multiple-Entry



Foreign Service of the Philippines
 Philippine Embassy, YANGON

YPE-CON-F-14
 Rev. 00/01 OCT 2018

APPLICATION FOR NON-IMMIGRANT VISA

Please provide requested information. Answers must be in English, legibly in **BLOCK** letters. Use **BLUE** or **BLACK PEN** and write "N/A" if not applicable.

Surname		First name		Middle Name		Applicant's Passport-size Photograph taken within the last 6 months DO NOT STAPLE
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female		Citizenship		Date of Birth (dd/mm/yy)		
Place of Birth		Civil Status <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Legally Separated <input type="checkbox"/> Married				
Age		Name of spouse: _____				
Contact No.		Home Address				
Occupation		Office of Employment and Address				
Father's Name		Mother's name				
Name and ages of Children, if any:						
Passport No.		Issued by:	Date of Issue (dd/mm/yy)		Valid Until (dd/mm/yy)	
Purpose of Entry: <input type="checkbox"/> Leisure <input type="checkbox"/> Business <input type="checkbox"/> Wellness <input type="checkbox"/> Official Business <input type="checkbox"/> Others: _____				Length of stay in the Philippines () days		
Port of Entry		National ID No.	Destination after the Philippines (if applicable)			
List of Documents Submitted: <input type="checkbox"/> Original Passport <input type="checkbox"/> Proof of Financial Capacity <input type="checkbox"/> Invitation letter <input type="checkbox"/> Air ticket <input type="checkbox"/> National ID <input type="checkbox"/> Others (please specify) _____						
Please answer the following questions:					Yes	No
Have you ever been issued a Philippine visa?						
Do you have a sponsor in the Philippines? Name: _____ Contact No.: _____						
Were you ever been refused any kind of Philippine visa before and denied admission into the Philippines? If yes, state circumstances:						
Have you ever been afflicted with a communicable or mental disease of public health significance, dangerous physical or mental disorder, or been a drug abuser or addict? If yes, state circumstances:						
Have you previously worked or do you intend to work in the Philippines? If Yes, please provide details:						
Do you have any communicable or other disease of public health significance, dangerous physical or mental disorder, or been a drug abuser or addict? If Yes, please provide details:						
Have you ever been arrested or convicted of any offense or crime, even though subject of a pardon, amnesty, or other legal action in the Philippines or any other country? If Yes, state the circumstances.						
Have you ever served in the military or served as a Foreign Agent of a foreign government? If yes, state the circumstances.						

I understand that I may enter the Philippines at the Port of Entry designated by the Philippine Immigration Authorities and under the condition imposed by those authorities.

I solemnly swear that the foregoing statements are true to the best of my knowledge.

Date: _____
 (dd/mm/yyyy)

 Name and Signature of Applicant

SUBSCRIBED AND SWORN TO BEFORE ME THIS DAY OF _____.

Serial No. :	O.R. No. :
Visa No. :	Fee Paid :
Type of Visa :	Service No. :

 Consul of the Republic of the Philippines