

FOREIGN SERVICE OF THE PHILIPPINES
 CONSULATE GENERAL OF THE PHILIPPINES
 San Francisco, California

Applicant's 2"x2" Color or Black & White Photograph taken within the last 6 months and signed across the front bottomline

**APPLICATION FOR IMMIGRANT VISA
 QUOTA/NON-QUOTA**

(Please see requirements printed on the reverse side of page 2)

SURNAME	FIRST NAME	MIDDLE NAME
SEX: Male Female	CITIZENSHIP:	
DATE OF BIRTH:	PLACE OF BIRTH:	
CIVIL STATUS: Single Widowed Married Divorced Separated	If married, state name and address of spouse:	
Applicant's Address(es) for the past 5 years:	Telephone Number:	Since:
	()	
	()	
	()	
	()	
	()	
Occupation:	Telephone Number:	Since:
	()	
Father's Name:	Mother's Name:	
Address where applicant intends to settle in the Philippines:		
Occupation to be pursued in the Philippines:	Name & address of employer in the Philippines, if any:	
Nearest relatives in the Philippines, if any:		
Name	Address	Relationship
INSTRUCTIONS: This form should be filled out in DUPLICATE . The original shall be returned to the applicant upon approval while the duplicate copy shall be retained by the Consulate.		

Have you ever been institutionalized for any mental disorder?
 No Yes (state when and where) _____

Do you have any physical defects?
 No Yes (state nature) _____

Are you afflicted with any contagious disease?
 No Yes (state nature) _____

Have you ever been convicted of any crime?
 No Yes (state when, where and nature) _____

On what basis do you claim to be:
 Preference Quota Immigrant Non-Quota Immigrant
 State facts on which you based your claim: _____

Have you ever been refused a visa of any kind at any Philippine diplomatic or consular office, or have been denied admission into the Philippines, or have been deported or removed at government expense from the Philippines?
 No Yes (state circumstances) _____

I understand that I may only enter the Philippines at a port of entry designated by Philippine Immigration authorities and with the permission of and under the conditions, including the filing of a bond, which may be imposed by said authorities.

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

Signature of Applicant

SUBSCRIBED AND SWORN to before me this _____ day of _____ (month) _____ (year)

Consul of the Republic of the Philippines

PHILIPPINE IMMIGRANT VISA NO. _____

Quota Immigrant	Non-Quota Immigrant under
Quota No. _____	Section _____
	of the Philippine Immigration
	Act of 1940, as amended

ISSUED TO: _____ DATE: _____

NATIONALITY: _____ VALID UNTIL: _____

Bearer has the following travel document:

Type: _____	Date of Issue: _____
Passport No. _____	Valid Until: _____
Issued by: _____	

Consul of the Republic of the Philippines

Fee Paid _____
 O.R. No. _____
 Service No. _____

FOREIGN SERVICE OF THE PHILIPPINES MEDICAL EXAMINATION OF VISA APPLICANTS

PLACE OF EXAMINATION	DATE	PHOTO 2" x 2"
At the request of the Philippine Consulate at San Francisco, California	City	
	Country	

I certify that on the above date, I examined:

Name		
Age	Sex	Citizenship

And that under the Philippine Immigration Regulations, the applicant should be classified as follows:
(Encircle the appropriate class)

CLASS A	<p style="text-align: center;"><u>DANGEROUS CONTAGIOUS DISEASE</u></p> <p>Chancroid, Gonorrhea, Granoloma Inguinale, Leprosy (Infectious) Lymphogranuloma Venereum, Syphilis (Infectious Stage), Tuberculosis (Active), and AIDS.</p> <p style="text-align: center;"><u>SERIOUS MENTAL DISORDER</u></p> <p>Mental retardation (mental deficiency), Insanity, Previous occurrence of one or more attacks of Insanity, Antisocial personality, Mental defects, Epilepsy, Sexual deviation, Narcotic drug addiction, Chronic Alcoholism.</p>
CLASS B	<p style="text-align: center;"><u>IF NOT CLASS A</u></p> <p>Persons having physical defect, disease, or disability serious in degree or permanent in nature that will impair their ability to earn a living as to make them likely to be a public charge.</p>
CLASS C	<p>Minor Conditions.</p>

MEDICAL RECORDS

1. Pertinent medical history
2. Significant physical examination
3. Chest x-ray report: (for ages 11 years and older)
(Present x-ray film 14" x 17" and results)
4. Laboratory Examination: (Attach laboratory reports) 2 copies each
 - a. Blood Serology : Ages 15 years and above Rapid Plasma Reagin (RPR)
 - b. Urine : Ages 1 year and above
 - c. Stool : Ages 1 year and above Ova or Parasites

Not physically and mentally defective or diseased

Examining Physician	Address and Telephone No.
<i>(To the Examining Physician: Please fill up completely all the information specified above concerning the visa applicant)</i>	

Non-Quota Immigrant Visa Guidelines

Requirements for the issuance of a Non-Quota Immigrant Visa under Section 13(g) of Republic Act No. 4376 to a natural-born citizen or the Philippines who has been naturalized in a foreign country and is returning to the Philippines for permanent residence, including his/her spouse and minor unmarried children:

1. Personal Interview – To arrange for an appointment, applicant should call telephone no. (415) 433-6666 extension 331. Bring along the following item numbers 2 to 11 for evaluation during the interview;
2. Applicant's passport which must be valid for a period of at least six (6) months from the date of application;
3. Application for Immigrant Visa (FA Form No. 3) must be accomplished in duplicate by each applicant or he/she may opt to submit one original and one photocopy;
4. Four (4) identical 2"x2" photographs in color or black and white, taken within the last six (6) months and signed across the front bottom line by the applicant;
5. Proof of Financial Support - Submit two (2) copies of any of the following:
 - a. Certificate from the bank (savings, assets)
 - b. Statement of monthly pension (benefits)
 - c. Affidavit of Support from a US-based relative, duly notarized
 - d. DD-214, if retired from the US Armed Forces
6. Medical and Physical Examination – the prescribed medical certificate (FA Form No. 11) must be filled out in duplicate and signed by the examining physician. Two (2) copies each of all laboratory tests results and original chest x-ray film with results should also be submitted.
7. Visa fee of \$150.00 for each applicant to be paid in cash, money order, bank draft, or cashier's check, payable to the Philippine Consulate General. Personal checks are not accepted;
8. Certificate of Naturalization;
9. Original and two (2) photocopies of applicant's birth certificate or baptismal certificate or old Philippine passport;
10. For married female applicants regardless of whether they are applying alone or with spouse – original and two (2) photocopies of marriage certificate;
11. For applicants who are 15 years old and above – original and one (1) photocopy of police clearance from the city or town where they have resided or have been residing for the last 5 years.

Requirements for the issuance of a Non-Quota Immigrant Visa under Section 13(a) of Republic Act No. 4376 to a foreign spouse of a Philippine citizen who is applying for permanent residency in the Philippines:

- a. Birth Certificate of applicant, original and two (2) photocopies;
- b. Filipino spouse's Birth Certificate or old Philippine passport, original and two (2) photocopies;
- c. Letter from Filipino spouse requesting issuance of a 13(a) non-quota immigrant visa to the foreign spouse, original and two (2) photocopies;
- d. Marriage Certificate, original and two (2) photocopies;
- e. Item numbers 1 to 7 as specified above.