



CONSULATE GENERAL OF THE REPUBLIC OF THE PHILIPPINES
KONSULADONG PANLAHAT NG REPÚBLIKA NG PILIPINAS

CALGARY
 Suite 100, 1001 1st. St.
 SE, Calgary, AB, T2G
 5G3
 Tel. No.: (403) 455-9457
 Emergency Hotline: (587) 577-1524
 E-mail: CalgaryPCG.visa@gmail.com

4.5 cm X 3.5 cm
PHOTO

WHITE
 background taken
 within last six (6)
 months, without
 eyeglasses, clearly
 showing the full front
 view of the face

APPLICATION FOR NON-IMMIGRANT VISA

| | | | | | | | |
|---|--|---|--|---|--|------------------------------------|--|
| SURNAME | | GIVEN NAME | | MIDDLE NAME | | SEX () Male () Female | |
| DATE OF BIRTH: DAY MONTH YEAR | | PLACE OF BIRTH: CITY PROVINCE COUNTRY | | CITIZENSHIP | | | |
| PRESENT ADDRESS: House No. Street | | Town Province | | Country | | Postal Code | |
| TELEPHONE NO.: | | | | | | | |
| CIVIL STATUS: () SINGLE () MARRIED () WIDOWED () DIVORCED () SEPARATED If married, state name and address of spouse: Name: Address: | | | | | | | |
| OCCUPATION: Company Name: Address: Telephone No.: | | | | FINANCIAL MEANS OF SUPPORT WHILE IN THE PHILIPPINES: | | | |
| PASSPORT NO.: | | DATE OF ISSUE: (Day/Month/Year) | | ISSUED IN | | VALID UNTIL (dd/mm/yyyy) | |
| PURPOSE OF ENTRY: | | LENGTH OF STAY: | | PORT OF ENTRY | | IN THE | |
| DESTINATION/S IN THE PHILIPPINES: | | | | ADDRESS IN THE PHILIPPINES: | | | |
| REFERENCE/CONTACT PERSON IN THE PHILIPPINES: Name Address Telephone No. | | | | | | | |
| Supporting Documents submitted and offered for inspection in support of visa application: | | | | | | | |
| Have you been convicted of any crime? If Yes, () Yes () No provide details: | | | | | | | |
| Do you have a communicable disease? If Yes, () Yes () No provide details: | | | | | | | |
| Do you have a history of mental illness? If Yes, () Yes () No provide details: | | | | | | | |
| Were you ever refused of any kind of Philippine visa, denied admission into or deported from the Philippines and removed at government expense from the Philippines and other countries? () Yes () No If Yes, provide details: | | | | | | | |
| I understand that I may enter the Philippines at the Port of Entry designated by the Philippine Immigration Authorities and under the conditions imposed by those authorities. I solemnly swear that the foregoing statements are true to the best of my knowledge: <div style="display: flex; justify-content: space-between;"> <div>_____ Date</div> <div>_____ Signature of Applicant</div> </div> SUBSCRIBED AND SWORN to before me this .day of _____ <div style="text-align: center;">_____ Consul of the Republic of the Philippines</div> | | | | | | | |
| (For official use only) | | | | | | | |
| Non-immigrant Visa No. _____ under section _____ of _____ Immigration Act of 1940, as amended issued to _____ on _____ and valid until _____ consular notation _____ Visa Sheet No. _____ Purpose: _____ Number of entries: _____ Service No.: _____ _____ O.R. No.: ____ | | | | | | | |
| _____ Processor | | | | _____ Consul of the Republic of the Philippines | | | |