



FOREIGN SERVICE OF THE PHILIPPINES  
 PHILIPPINE CONSULATE GENERAL  
 LOS ANGELES CALIFORNIA  
 UNITED STATES OF AMERICA

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## APPLICATION FOR RETENTION / RE-ACQUISITION OF PHILIPPINE CITIZENSHIP

Revised 18 JULY 2011 (LAPCG)

<b>OFFICIAL RECEIPT NO.</b>	2"X2" Colored Photograph	2"X2" Colored Photograph	2"X2" Colored Photograph
<b>SERVICE NO.</b>	plain white background taken within last six (6) months, without eyeglasses, clearly showing the full front view of the face	plain white background taken within last six (6) months, without eyeglasses, clearly showing the full front view of the face	plain white background taken within last six (6) months, without eyeglasses, clearly showing the full front view of the face
<b>CASHIER</b>	DO NOT PASTE OR STAPLE PHOTOS; STORE THEM IN PHOTO POUCH OR FOLDER	DO NOT PASTE OR STAPLE PHOTOS; STORE THEM IN PHOTO POUCH OR FOLDER	DO NOT PASTE OR STAPLE PHOTOS; STORE THEM IN PHOTO POUCH OR FOLDER
<b>SCAN NO.</b>	<b>FRONT VIEW</b>	<b>FRONT VIEW</b>	<b>FRONT VIEW</b>
<b>1. NAME AS WRITTEN ON PHILIPPINE BIRTH CERTIFICATE OR REPORT OF BIRTH (INCLUDING MARRIED SURNAME, IF PROPER)</b>	<b>1a. LAST NAME (surname or family name)</b>		
	<b>1b. FIRST NAME (given names)</b>	<b>1c. MIDDLE NAME (mother's maiden surname)</b>	
<b>2. ARE YOU USING A DIFFERENT NAME?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, INDICATE NAME CURRENTLY USED	<b>2a. LAST NAME (surname or family name)</b>	<b>2b. FIRST NAME (given names)</b>	<b>2c. MIDDLE NAME</b>
	<b>2d. SUPPORTING DOCUMENTS FOR CHANGE OF NAME</b>		
<b>3. DATE OF BIRTH</b>		<b>4. PLACE OF BIRTH (town or city, province or state, country)</b>	
DAY MONTH (write whole word) YEAR			
<b>5. SEX</b> <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	<b>6. CIVIL STATUS</b>	<b>7. EYE COLOR</b>	<b>8. HAIR COLOR</b>
<b>9. DISTINGUISHING MARKS ON FACE</b>			
<b>9a. NAME OF SPOUSE (last name, first name, full middle name)</b>		<b>9b. CITIZENSHIP OF SPOUSE AT THE TIME OF APPLICATION</b>	
<b>10a. NAME OF APPLICANT'S FATHER (last name, first name, full middle name)</b>		<b>10b. FATHER'S CITIZENSHIP AT THE TIME OF APPLICANT'S BIRTH</b>	
<b>11a. NAME OF APPLICANT'S MOTHER (last name, first name, full middle name)</b>		<b>11b. MOTHER'S CITIZENSHIP AT THE TIME OF APPLICANT'S BIRTH</b>	
<b>12. HOW PHILIPPINE CITIZENSHIP WAS INITIALLY ACQUIRED</b> <input type="checkbox"/> BIRTH <input type="checkbox"/> ELECTION <input type="checkbox"/> MARRIAGE <input type="checkbox"/> NATURALIZATION <input type="checkbox"/> OTHERS (specify)			
<b>13a. APPLICANT'S CURRENT FOREIGN CITIZENSHIPS (specify all)</b>		<b>13b. MODE OF ACQUISITION OF FOREIGN CITIZENSHIPS (specify all)</b>	
<b>14a. DATE OF ACQUISITION OF FOREIGN CITIZENSHIPS (day / month / year)</b>		<b>14b. NATURALIZATION CERTIFICATE NUMBERS</b>	
<b>15a. FOREIGN PASSPORT NO. / VALID FOREIGN GOV'T ISSUED ID NO.</b>		<b>15b. DATE AND PLACE OF ISSUANCE OF ID (day/ month/ year)</b>	
<b>16. SUPPORTING DOCUMENTS SUBMITTED</b> <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Report of Birth <input type="checkbox"/> Baptismal Certificate <input type="checkbox"/> Affidavit of _____ Disinterested Person(s) <input type="checkbox"/> Old Philippine Passport <input type="checkbox"/> Naturalization Certificate <input type="checkbox"/> Marriage Certificate <input type="checkbox"/> Others (specify) _____			
<b>17. PHILIPPINE PERMANENT ADDRESS (house no., street, town or city, state, country, postal zone)</b>			
<b>18. ADDRESS IN U.S. OR COUNTRY OF RESIDENCE (house no., street, town or city, state, country, postal zone)</b>			
<b>19. HOME TELEPHONE NO.</b>	<b>20. E-MAIL ADDRESS/FAX NO.</b>	<b>21. WORK TELEPHONE NUMBER</b>	<b>22. PRESENT OCCUPATION</b>
<b>23. WORK ADDRESS (office name, building no., street, town or city, state, country, postal zone)</b>			<b>24. APPLICANT'S SIGNATURE</b>

CONTINUE ON REVERSE SIDE