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BI FORM 2014-00-003 Rev 0 **CONSOLIDATED GENERAL APPLICATION FORM** FOR STUDENT VISA AND SPECIAL STUDY PERMIT

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ADDI TOATTONI FODM				

I. APPLICATION INFORMATION Present Immigration Status Attach your 2x2 colored photograph Nature of Application Type of Application with white background using Conversion Permit Student Visa Special Study Permit Extension permanent glue in the Course/Degree photograph box. The photograph must be taken Number of Months/Year Applied for School Year within the last three (3) months from the date of application. Months 1 Year A scanned photograph is not Name of School Representative [Last Name, First/Given Name, Middle Name] allowed. A photograph of the applicant wearing eyewear (i.e. sunglasses, colored contact lenses, School Representative Identification Number etc.) or headwear is not acceptable. **II. APPLICANT'S TRAVEL INFORMATION** Passport Number Date of Latest Arrival [DD-MMM-YYYY e.g. 01 JAN 1990] Expiry Date/Valid Until [DD-MMM-YYYY e.g. 01 JAN 1990] Flight Number Place of Issuance Last Day of Authorized Stay [DD-MMM-YYYY e.g. 01 JAN 1990] **III. APPLICANT'S PERSONAL INFORMATION** Last Name First/Given Name Middle Name Other Name(s)/Alias(es) Date of Birth [DD-MMM-YYYY e.g. 01 JAN 1990] Gender Country of Birth M F Citizenship/Nationality Civil Status Single Married Annulled Height [cm] Weight [kg] Separated Widowed Divorced Contact Number(s) in the Philippines Email Address Landline Mobile **Residential Address in the Philippines Residential Address Abroad** House/Unit No., Street, Subdivision/Village House/Unit No., Street, Subdivision/Village Barangay, Municipality/City City, State Province, Zip Code Country, Zip Code Name of Spouse [Last Name, First/Given Name, Middle Name] Other Name(s)/Alias(es) Name(s) of Child(ren) and Date(s) of Birth [Last Name, First/Given Name, Middle Name] Date of Birth [DD-MMM-YYYY e.g. 01 JAN 1990] Last Name, First/Given Name, Middle Name Date of Birth [DD-MMM-YYYY e.g. 01 JAN 1990] Note: If the applicant has more than two (2) children, use BI Form 2014-00-005 Rev 0. _ __ __ __

APPLICANT'S ACR I-CARD CLAIM STUB



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[IF THE ACR I-CARD IS CLAIMED BY AN AUTHORIZED REPRESENTATIVE, PLEASE SEE REVERSE SIDE FOR INSTRUCTIONS.]

BI FORM 2014-00-003 Rev 0 This document of CONSOLIDATED GENERAL APPLICATION FORM FOR STUDENT VISA AND SPECIAL STUDY PERMIT

IV. SCHOOL'S INFORMATION

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CERTIFICATION

I/We certify that: (1) All the information in the application is truthful, complete and correct; (2) All documents are authentic and were legally obtained from the corresponding government agencies or private entities; (3) I/We understand that my/our application may be summarily denied if: (a) Any statement is false; (b) Any document submitted is falsified; or (c) I/We fail to comply with all the BI requirements without prejudice to whatever action the BI may take; and (4) I/We have not filed this or any similar application before any office of the Bureau.

Date	[D[D-MM	M-YYYY
e.g.	01	JAN	1990]

Petitioner's Signature over Printed Name

Applicant's Signature over Printed Name

	ACR I-CARD WILL ONLY BE RELEASED UPON COM	PLIANCE/SUBMISSION OF THE FF:							
Name of Representative	1. Photocopy of passport bio-page of the ACR I-Card hold								
Accredited Travel Agency/Law Office	 Valid ID of either parent claiming the ACR I-Card, if an 3. Photocopy of the BI-Accreditation ID card, if claimed b 								
BI Accreditation No	4. Special Power of Attorney (SPA), if claimed by an authorized representative other than the								
Contact No	parent or BI accredited entity								
Residential /Office Address	ACR I-Card Holder:	Claimant:							
Signature	Signature over PRINTED NAME [Please call (+632) 525-7557 to check the	Signature status of your application							