

FOREIGN SERVICE OF THE PHILIPPINES
REPORT OF BIRTH
CHILD BORN ABROAD OF FILIPINO PARENT OR PARENTS
HONG KONG SAR

 (Date of Report)

Name of Child (in full) _____
 (Given Name, Middle Name, Surname)

Date of Birth _____ Sex _____
 Day - Month - Year

Place of Birth _____

Civil Status of Parents Married Not Married

Father

Mother

Full Name _____

Full Name _____

Date of Birth _____

Full Maiden Name _____

Place of Birth _____

Date of Birth _____

Citizenship _____

Place of Birth _____

Philippine citizenship acquired by: Birth Naturalization

Citizenship _____

Philippine citizenship acquired by: Birth Naturalization

If by other means, please specify _____

If by other means, please specify _____

If acquisition of Philippine citizenship is other than by birth, please indicate date and place of registration as Philippine citizen

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Passport No. _____

Passport No. _____

Issued by _____

Issued by _____

Dated _____ Valid until _____

Dated _____ Valid until _____

Occupation _____ Religion _____

Occupation _____ Religion _____

Present Residence: _____

Present Residence: _____

Precise periods and places of Philippine residence: _____

Precise periods and places of Philippine residence: _____

Place and date of Marriage _____ / _____

Number of children before this _____ Number now living _____

Name and address of attending physician or nurse _____

I/We solemnly swear under penalty of law that the statements made in this report are true and correct and that the attached supporting documents are authentic, I/We hereunto set my/our hand(s) this _____ day of _____ at _____ (Signature/s of parent/s, physician or nurse)

(WHEN REPORTED BY MAIL, SIGN IN THE PRESENCE OF TWO WITNESSES)

(WHEN REPORTED IN PERSON, USE THIS FORM)

Declared in our presence this _____ day of _____ at _____

Subscribed and sworn to before me this _____ day of _____, at _____ of the Philippines.

(Witness) _____

(Seal)

(Witness) _____

(Address) _____

(Address) _____

PHILIPPINE CONSULATE GENERAL
HONG KONG SAR

 (Date of Report)

The foregoing information was furnished by (father, mother, physician, nurse) and supported by (affidavit, physician's certificate, certificate from local authorities). This report has been executed in triplicate, with a copy transmitted to Department of Foreign Affairs, Manila and another placed in the files of this Office.

Remarks _____

SVC. No. :

O.R. No. :

Fee Paid :