



## Foreign Service of the Philippines Philippine Consulate General, Chicago



FA Form No.2A

## **APPLICATION FOR NON-IMMIGRANT VISA**

Please provide requested information. Answers must be in English, legibly in BLOCK letters. Use BLUE PEN and write "N/A" if not applicable.

N/A II IIOt applicable.											
1. Name (Last name, Gi	ven nar	ne, Middle nar	ne as	it appears	in passpo	rt)					
								Арі	olicant'	S	
2. Sex 3. Nationalit			to an Citizanahin/a2					Pass	Passport-size		
$\square$ Male $\square$ Female $\square$ X <sup>1</sup>			ty or Citizenship/s <sup>2</sup> 4. Date of Birth (dd/mm/yyyy)					Photog	graph ta	aken	
5. Place of Birth (City, Province, Country)				0.00:41.04	-1			withir	the la	st 6	
5. Place of Birth (City, Pro	ovince,	Country)		6.Civil St □ Single		idowed		m	onths		
				☐ Single			arated				
			☐ Divorced ☐ Legally Separated ☐ Married ☐ Others:				DO N	OT STA	PLE		
				Name of s							
7.Occupation	8. Hc	. Home Address									
·											
9. Contact No.		10. Email Ad	Irocc		11	Social N	Andia and Acco	unt Namo			
9.Contact No.			dress 11. Social Media and Accou					uni Name	int Name		
10 5 11 1 5 11 11											
12. Father's Full Name 13. Father's Citizenship											
14. Mother's Full Maide	n Name	Э	15.	Mother's C	itizenship		Name of travel	ling compa	anion		
(for minors <sup>3</sup> only)											
17. Type of Passport							./4!! 5		_		
☐ Regular ☐ Official/s			.Р Ц	•			nent/Alien Pass	-	Emerge	ency	
18. Passport No.	19. I	ssued by:		20. Date	e of Issue	(dd/mm/y	y) 21. Valid	Until (dd/n	nm/yy)		
22. Purpose of Entry (p	lease cl	heck all possib	le bo	xes)	<b>—</b>		_				
			I.								
<u>Leisure</u>		/Wellness		<u>Business</u>			<u>Business</u>	Other:			
		tourist (for		leeting/ onference/s		Sponso		(Please s	pecity)		
☐Cruise Passenger Vessel Name		reatments) traveller (for		onierence/s nvited/	seminar	□ Philip	rnment				
Vessel Name		treatments		ponsored b	V		official			_	
□Visit relatives/		procedures)		Philippine c		□Fore					
friends	]Accom	panying		Exploring	, ,		ernment				
		s for medical	b	ousiness op	portunity	□Interr					
	treatm	ent				Orgar	nization				
23. Date of expected ar	rival (do	d/mm/yyyy) 2	24. P	ort of entry			25. Length of	stay in the	Philip	pines	
							( ) day	/S			
26. Flight number			27	7. Destinati	on after th	e Philippi	nes (if applicab	le)			
28. Place/s of stay in the	Philippi	nes (complete	addre	ess)							
29. Reference/s in the Ph	ilippine	s: (if for health	reaso	ons, please	specify m	edical cer	nter/facility/spo	nsor)			
						Contact N	0.				
30. Address of Reference	e/s in the	e Philippines									
31. List of Documents Su	bmitted	:									
☐ Original Passport				nancial Cap		□Invitati		□Travel			
☐ Hotel/Room Reser		□Confir	med 1	tickets for re	eturn or or	nward jour	ney to the next	port of de	estinatio	n	
Others (please spe									Lv	T	
Please answer the followi			-0 /lf			nuncile :	Dhiling-in-		Yes	No	
32. Have you ever been in		i Philippine vis	a? (If	yes, attach	copies of	previous	Philippine visas	s and			
Philippine arrival stam	ips.)										

<sup>&</sup>lt;sup>1</sup>Please check 'X' if sex is not stated or identified in the submitted passport

<sup>&</sup>lt;sup>2</sup>For applicants with dual or multiple nationalities, please enumerate all

33. Have you ever been to the Philippines?	
34. Have you ever been refused any kind of Philippine vis Philippines or any other country? If Yes, please provide	
35. Do you have a valid visa issued by other countries? If	ves, attach copy.
36. Do you intend to eventually study, work, or live in the	
37. Do you have any communicable or other disease of promental disorder, or been a drug abuser or addict? If Y	
Have you ever been convicted of any offense or crime please provide details:	in the Philippines or any other country? If Yes,
I understand that I may enter the Philippines at the Port of Entry designate imposed by those authorities.  I understand that the issuance of visa is a privilege, not a right. Mere submiguarantee nor compel this office to issue me any visa. In addition, I also ur  The processing and evaluation fee charged for each accepted app Documents that I have submitted to the embassy/consulate in conformation. I will refrain from making calls, inquiries and other folloon. The consular office is not obliged to provide any information or exp I solemnly swear that the foregoing statements are true to the best Date:  Date: (dd/mm/yyyy)	nission of an application and the payment of processing fees do not inderstand that: lication is non-refundable. nection with my visa application shall not be returned. within a period of work days after the date of acceptance of w-ups on the status of my visa application ilanation for refused applications.
SUBSCRIBED AND SWORN TO BEFORE ME THIS DAY Consul of the Republic of the Philippines For Embassy/Consul	
LOL Verifier: Date Verified	
Visa no granted on valid unt Philippine Immigration Act of 1940, as amended.	
Entry: Single Multiple Fee:	OR: SN:
Remarks, if any:	Document released to:
	Nove
	Name:
	Date Released:
Affix visa and admission stamps below this for app	olicants for Stateless and those under FSC 211-12
BI Admission	
AFFIX VISA HERE	