


**SPECIAL RESIDENT RETIREE'S VISA APPLICATION**

(Form PRA-RRSC-2013-01)

FOR PRINCIPAL RETIREE USE

 <p><b>PHILIPPINE RETIREMENT AUTHORITY</b>                  29F Citibank Tower, Paseo de Roxas, Makati City, 1227 Philippines                  Tel No. +632-848-1412, +632-848-1418; Fax No. +632-848-1411                  E-mail: inquiry@pra.gov.ph; Website: pra.gov.ph</p>				Attach 2" x 2" colored photo taken not more than 6 months ago	
<b>APPLICATION FORM FOR PRINCIPAL RETIREE</b> ( <i>Entries must be typewritten</i> )					
<b>SRRV Options</b> ( <i>Please Check</i> ✓)				Application No.	
<input type="checkbox"/> SMILE <input type="checkbox"/> Classic <input type="checkbox"/> Human Touch <input type="checkbox"/> Courtesy					
Last Name		First Name		Alias (AKA)	Religion
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth		Place of Birth		Nationality ID No.
Civil Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed			Height		Weight
Passport No.		Place of Issue		Date of Issue	Valid Until
Home Country Address ( <i>Please specify</i> )					
Telephone No.		Fax No.		Mobile No.	E-mail
Primary Address in the Philippines ( <i>Please specify</i> )					
Secondary Address in the Philippines ( <i>Please specify</i> )					
Telephone No.		Fax No.		Mobile No.	E-mail
Family Member Information					
Name of Spouse:		Date of Birth	Age	ID No. ( <i>Required</i> )	Included in your application? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Child :		Date of Birth	Age	ID No. ( <i>Required</i> )	Included in your application? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Child :		Date of Birth	Age	ID No. ( <i>Required</i> )	Included in your application? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Child :		Date of Birth	Age	ID No. ( <i>Required</i> )	Included in your application? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Child :		Date of Birth	Age	ID No. ( <i>Required</i> )	Included in your application? <input type="checkbox"/> Yes <input type="checkbox"/> No

( if necessary, use additional sheet )

<b>Parent's Information</b>															
Name of Father :		Name of Mother :													
Age		Age													
Name of Contact Person in Case of Emergency :	Contact No. :	Nationality	Relationship:												
	Address :														
Date of Arrival in the Philippines	Expiration Date of Tourist Visa / Others	Entry Visa to the Philippines													
<p>Have you visited Philippines prior to this travel? <span style="float: right;"><input type="checkbox"/> Yes <span style="margin-left: 100px;"><input type="checkbox"/> No</span></span></p> <p>If the answer is "Yes", What kind of entry visa?</p> <p> <input type="checkbox"/> Tourist Visa                      <input type="checkbox"/> Working Visa                      <input type="checkbox"/> Investment Visa  <input type="checkbox"/> Missionary Visa                      <input type="checkbox"/> Student Visa                      <input type="checkbox"/> Others (<i>Please specify</i>) _____ </p>															
<p><b>Last three years residence</b></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%; padding: 5px;">Period of stay (mm/yyyy - mm/yyyy)</th> <th style="width: 60%; padding: 5px;">Address</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">1 _____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">2 _____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">3 _____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">5 _____</td> <td style="padding: 5px;">_____</td> </tr> </tbody> </table>				Period of stay (mm/yyyy - mm/yyyy)	Address	1 _____	_____	2 _____	_____	3 _____	_____	5 _____	_____		
Period of stay (mm/yyyy - mm/yyyy)	Address														
1 _____	_____														
2 _____	_____														
3 _____	_____														
5 _____	_____														
Educational Attainment	School and Location	From/To (mm/yyyy - mm/yyyy)													
1 _____	_____	_____													
2 _____	_____	_____													
3 _____	_____	_____													
<p>Name and Address of Present Company / Business (<i>if any</i>): _____</p> <p>_____</p> <p>Contact No. _____</p> <p>_____</p>															
<p>Aside from retirement, what are the other plans/future actions in the Philippines</p> <p> <input type="checkbox"/> Tourism/Travel                      <input type="checkbox"/> Investment  <input type="checkbox"/> Employment                      <input type="checkbox"/> Others (<i>Please specify</i>) _____ </p>															
<p><b>Employment in the last three (3) years.</b></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 45%; padding: 5px;">Company Name and Address</th> <th style="width: 20%; padding: 5px;">Job Title</th> <th style="width: 35%; padding: 5px;">From/To (mm/yyyy~mm/yyyy)</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">1 _____</td> <td style="padding: 5px;">_____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">2 _____</td> <td style="padding: 5px;">_____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">3 _____</td> <td style="padding: 5px;">_____</td> <td style="padding: 5px;">_____</td> </tr> </tbody> </table>				Company Name and Address	Job Title	From/To (mm/yyyy~mm/yyyy)	1 _____	_____	_____	2 _____	_____	_____	3 _____	_____	_____
Company Name and Address	Job Title	From/To (mm/yyyy~mm/yyyy)													
1 _____	_____	_____													
2 _____	_____	_____													
3 _____	_____	_____													

**Please read carefully:**

*The following classes of aliens shall be excluded from entry into the Philippines and not eligible to acquire a Special Resident Retiree's Visa:*

1. Insane persons/person afflicted with a dangerous contagious disease, Persons with manifestation of any anxiety, depressive, psychotic, personality and psychological disorders identified and observed during the conduct of medical examination as well certifications of the person's attending the physician.
2. Pauper, vagrant, and beggars, persons likely to become a public charge, stowaways, persons who have been excluded or deported from the Philippines including those deported as indigent aliens or persons not properly documented for admission;
3. Persons who have been convicted of a crime involving moral turpitude, prostitutes or procures, persons coming for any immoral purposes;
4. Persons who believe in or advocate the overthrow by force and violence of the Government of the Philippines, or of constituted lawful authority, or who disbelieve in or are opposed to organized government; people who use force and violence in pursuit of their advocacies;
5. Persons over fifteen (15) years of age, physically capable of reading, who cannot read printed matter in ordinary use in any language selected by the alien, persons who are members of a family accompanying an excluded alien; or
6. Persons coming to perform unskilled manual labor in pursuance of a promise or offer of employment;

**The mere act of submitting this form, for the purpose of processing the application, is an affirmation that the applicant is not excluded nor a disqualified person based on existing Philippine Immigration laws.**

By affixing my signature, I hereby certify that the information above are true and correct and that any misrepresentation on my part will be grounds for denial of SRRV and/or revocation of my current Visa:	Accredited Marketer <i>(if any)</i> :
	Registered Name of Marketer:
Date Signed :	PRA Accreditation No:
	Telephone No:

*(To be accomplished by PRA Personnel)*

-----

Date of Receipt of Application Form : \_\_\_\_\_

Papers Reviewed & Certified Complete by: *(Please indicate complete name, designation, and long-form signature)*

Comments / Remarks:

\_\_\_\_\_

*(To be accomplished upon issuance of SRRV)*

-----

SRRV Number: \_\_\_\_\_

Date of Issuance: \_\_\_\_\_

Date of Oath-taking: \_\_\_\_\_

**FOR MARKETING RESEARCH PURPOSES**

1 How did you learn about SRRV?

- PRA Office / Officers                       PRA Newsletters                       Newspaper
- PRA Website                                       TV     Other Websites \_\_\_\_\_
- Friends, Families, associates               Magazine                                       Marketers \_\_\_\_\_

2 Have you visited the Philippines prior to joining The PRA Program?     Yes                       No

If Yes, how many times? \_\_\_\_\_                      When was the last time you visited? \_\_\_\_\_

On the average how long did you stay? \_\_\_\_\_                      Where did you stay? \_\_\_\_\_

3 Which part of the Philippines do you particularly plan to stay longer?

- Baguio               Clark               Subic               Metro Manila               Tagaytay
- Cebu               Davao               Others Please specify : \_\_\_\_\_

4 I would like to receive updates / news about PRA and its partners, thru the following:

- By Phone                      Phone No.: \_\_\_\_\_
- By Email                      Email Address: \_\_\_\_\_
- By Post                      Postal Address: \_\_\_\_\_