

SPECIAL RESIDENT RETIREE'S VISA APPLICATION
(Form PRA-RRSC-2013-02)



PHILIPPINE RETIREMENT AUTHORITY

29F Citibank Tower, Paseo de Roxas, Makati City, 1227 Philippines
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E-mail: inquiry@pra.gov.ph; Website: pra.gov.ph

Attach 2" x 2" colored photo taken not more than 6 months ago

APPLICATION FORM FOR DEPENDENT RETIREE (*Entries must be typewritten*)

Dependent - Spouse Dependent - Child

Application No. _____

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	
Principal Retiree Information		Name of Principal:			
Included in this application?		<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>Please provide principal's SRRV information</i>)			
		SRRV No. _____		Date Issued _____	
<input type="checkbox"/> SMILE		<input type="checkbox"/> Classic		<input type="checkbox"/> Courtesy <input type="checkbox"/> Human Touch	
Family Information		<i>For applying dependent-spouse please list name(s) of children below 21 years old; for applying dependent-child, please list name(s) of siblings.</i>			
Name:	Date of Birth	Age	ID No. (<i>Required</i>)	Included in your application? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name:	Date of Birth	Age	ID No. (<i>Required</i>)	Included in your application? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name:	Date of Birth	Age	ID No. (<i>Required</i>)	Included in your application? <input type="checkbox"/> Yes <input type="checkbox"/> No	

FOR DEPENDENT RETIREE USE

Name:	Date of Birth	Age	ID No. (Required)	Included in your application? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name:	Date of Birth	Age	ID No. (Required)	Included in your application? <input type="checkbox"/> Yes <input type="checkbox"/> No

Parent's Information

Name of Father Age	Name of Mother Age
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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
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Have you visited Philippines prior to this travel? Yes No

If the answer is "Yes", What kind of entry visa?

Tourist Visa Working Visa Investment Visa

Missionary Visa Student Visa Others (Please specify) _____

Educational Attainment	School and Location	From/To (mm/yyyy - mm/yyyy)
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____

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. I also commit to inform PRA in writing, of any change of information presented here:

Signature of Applicant: _____

Date Signed: _____

(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: _____