



# REGISTRATION FORM

## Honorary Consulate of the Philippines MONGOLIA

PHOTO  
1" X 1"  
2 copies

LAST NAME		DATE OF BIRTH	SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	CIVIL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCE
FIRST NAME		PLACE OF BIRTH		
MIDDLE NAME		NAME SUFFIX (e.g., JR.)		
PASSPORT NO.	DATE OF ISSUE	PLACE OF ISSUE		
ADDRESS IN MONGOLIA			OCCUPATION	TELEPHONE NUMBER
			POSTAL CODE	
ADDRESS IN THE PHILIPPINES				
POSTAL CODE		TELEPHONE/MOBILE #	E-MAIL ADDRESS	
<b>NAME &amp; ADDRESS OF PERSON TO BE CONTACTED IN CASE OF EMERGENCY:</b>				
NAME		ADDRESS		
RELATIONSHIP	TELEPHONE/MOBILE #			
NAME		ADDRESS		
RELATIONSHIP	TELEPHONE/MOBILE #			
<b>NAME &amp; ADDRESS OF BENEFICIARY/ BENEFICIARIES:</b>				
NAME		ADDRESS		
RELATIONSHIP	TELEPHONE/MOBILE #			
NAME		ADDRESS		
RELATIONSHIP	TELEPHONE/MOBILE #			
<b>IMMIGRATION STATUS</b>				
<input type="checkbox"/> PERMANENT	<input type="checkbox"/> TOURIST	<input type="checkbox"/> STUDENT	<input type="checkbox"/> OTHERS _____	
<input type="checkbox"/> CONTRACT WORKER	<input type="checkbox"/> BUSINESS	<input type="checkbox"/> SEAMEN	_____	
<b>IF EMPLOYED, HOW DID YOU FIND EMPLOYMENT? (PLEASE CHECK)</b>				
<input type="checkbox"/> RECRUITMENT AGENCY	NAME	ADDRESS		
<input type="checkbox"/> DIRECT HIRE	<input type="checkbox"/> TOURIST	<input type="checkbox"/> REFERRED BY RELATIVES / FRIENDS	<input type="checkbox"/> OTHERS (Please specify)	
NAME OF EMPLOYER			TELEPHONE	FAX
ADDRESS				
AFFIXED SIGNATURE			DATE	

Note: Please fill out this form and attach photocopies of your passport with latest Mongolia Visa, two 1" x 1" photos.