



**BI FORM CGAF-004-Rev 0  
CONSOLIDATED GENERAL APPLICATION FORM  
FOR TOURIST VISA EXTENSION**

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Attach your 2x2 colored photograph **with white background** using permanent glue in the photograph box.

The photograph must be taken within the last three (3) months from the date of application.

A scanned photograph is not allowed. A photograph of the applicant wearing eyewear (i.e. sunglasses, colored contact lenses, etc.) or headwear is not acceptable.

**I. APPLICATION INFORMATION**

Number of Months Requested

**Reason**

- |  |   |
|--|---|
| <input type="checkbox"/> Pleasure                      | <input type="checkbox"/> With Valid Special Study Permit    |
| <input type="checkbox"/> Health                        | <input type="checkbox"/> With Valid Special Work Permit     |
| <input type="checkbox"/> Business                      | <input type="checkbox"/> With Valid Provisional Work Permit |
| <input type="checkbox"/> Others, please specify: _____ | <input type="checkbox"/> With Valid Limited Work Permit     |

**Method of Application**

- Personal       Authorized Representative

Name of Authorized Representative [Last Name, First/Given Name, Middle Name]

BI Accreditation Number

**II. PERSONAL INFORMATION**

Last Name

First/Given Name

Middle Name

Other Name/Alias

Date of Birth [DD-MMM-YYYY e.g. 01 JAN 1990]

Gender

 M  F

Country of Birth

Citizenship/Nationality

Civil Status

- |                                    |                                  |                                   |
|------------------------------------|----------------------------------|-----------------------------------|
| <input type="checkbox"/> Single    | <input type="checkbox"/> Married | <input type="checkbox"/> Annulled |
| <input type="checkbox"/> Separated | <input type="checkbox"/> Widowed | <input type="checkbox"/> Divorced |

Height [cm]

Weight [kg]

**Residential Address in the Philippines**

House/Unit No., Street, Subdivision/Village

Barangay, Municipality/City

Province, Zip Code

**Residential Address Abroad**

House/Unit No., Street, Subdivision/Village

City, State

Country, Zip Code

**Contact Number(s) in the Philippines**

Landline

Mobile

**III. ACR I-CARD**

Alien Certificate of Registration (ACR) Number

Special Security Registration Number (SSRN)

ACR I-CARD Valid Until [DD-MMM-YYYY e.g. 01 JAN 1990]

**IV. TRAVEL INFORMATION**

Passport Number

Valid Until [DD-MMM-YYYY e.g. 01 JAN 1990]

Place of Issuance

Date of Latest Arrival [DD-MMM-YYYY e.g. 01 JAN 1990]

Flight Number

**V. LATEST TOURIST VISA EXTENSION**

Valid Until [DD-MMM-YYYY e.g. 01 JAN 1990]

Approved at (Name of BI Office e.g. BI Main)

**CERTIFICATION**

I/We certify that: (1) All the information in the application is truthful, complete and correct; (2) All documents are authentic and were legally obtained from the corresponding government agencies or private entities; (3) I/We understand that my/our application may be summarily denied if: (a) Any statement is false; (b) Any document submitted is falsified; or (c) I/We fail to comply with all the BI requirements without prejudice to whatever action the BI may take; and (4) I/We have not filed this or any similar application before any office of the Bureau.

Date [DD-MMM-YYYY e.g. 01 JAN 1990]

Applicant's Signature over Printed Name