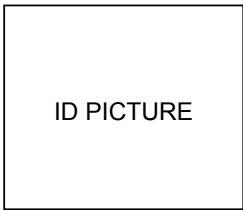




COMMISSION ON FILIPINOS OVERSEAS
INFORMATION SHEET FOR OVERSEAS-BASED FILIPINO EMIGRANTS

**DIRECTIONS:**

Print all data legibly in block letters
 Put an "X" in appropriate boxes to indicate answers
 Do not fill up section marked "For CFO Use Only"

| PERSONAL DATA | | | |
|--|---|---|--|
| Name (Last, First, Middle) | | Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female | Civil Status <input type="checkbox"/> 1- Single <input type="checkbox"/> 4-Separated <input type="checkbox"/> 2- Married <input type="checkbox"/> 5-Divorced <input type="checkbox"/> 3- Widow/er |
| If married, state maiden name: _____ | | | |
| Age | Date of Birth MO DAY YR | Place of Birth (Municipality/City/Province) | Ethno-Linguistic Group (Tagalog, Ilocano, Bisaya, etc) |
| Permanent Address in the Philippines (Street/Barangay/Municipality/City/Province) | | Contact Number (Cellphone or Telephone Number) | |
| Name of Nearest Relative in the Philippines | | E-mail Address | |
| Complete Address of Relative | | Relationship | |
| | | Cellphone/Telephone Number | |
| | | E-mail Address | |
| Highest Educational Attainment | | | |
| <input type="checkbox"/> No Formal Education <input type="checkbox"/> High School Level <input type="checkbox"/> Vocational Graduate <input type="checkbox"/> Post Graduate Level <input type="checkbox"/> Others _____ <input type="checkbox"/> Elementary Level <input type="checkbox"/> High School Graduate <input type="checkbox"/> College Level <input type="checkbox"/> Post Graduate <input type="checkbox"/> Elementary Graduate <input type="checkbox"/> Vocational Level <input type="checkbox"/> College Graduate <input type="checkbox"/> Not of Schooling Age (below 7 years old) If Vocational/College/Post Graduate, please specify degree obtained _____ | | | |
| Economic Status (Within the Past Six Months) | | | |
| <input type="checkbox"/> Unemployed <input type="checkbox"/> Self-employed <input type="checkbox"/> Employed If not working: <input type="checkbox"/> Housewife/Househusband <input type="checkbox"/> Minor (below 7 yrs old) <input type="checkbox"/> Student <input type="checkbox"/> Retiree If self-employed or employed, please state profession / occupation / business <input type="checkbox"/> Out-of-School Youth <input type="checkbox"/> Others _____ | | | |
| Passport Number | Date of Issue | Visa Number | Date of Issue |
| Port of Exit (please state country) | Length of Stay in Present Country of Residence <input type="checkbox"/> 5 years or less <input type="checkbox"/> 6-10 years <input type="checkbox"/> 11-15 years <input type="checkbox"/> 16 years or more | | |
| Immigration Status in Present Country of Residence <input type="checkbox"/> Tourist <input type="checkbox"/> Overseas Filipino Worker <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Naturalized Citizen <input type="checkbox"/> Others _____ | | | |
| Complete Address in Country of Destination | | | Contact Number |
| PETITIONER DATA | | | |
| Name of Petitioner (Last, First, Middle) | | If petitioned by company or employer, please supply information below | |
| Relationship with Petitioner | Age | Occupation | Employer/Company |
| Complete Address of Petitioner Abroad | | | Address of Employer/Company |
| Citizenship | Occupation | E-mail Address | |
| Civil Status of Petitioner | Year of Migration | Telephone Number | |
| FOR CFO USE ONLY | | | |
| <input type="checkbox"/> Spouse of foreign national <input type="checkbox"/> Fiance(e) of foreign national <input type="checkbox"/> Child of Filipino married tot foreign national <input type="checkbox"/> Child of former Filipino citizen <input type="checkbox"/> Spouse of Filipino immigrant <input type="checkbox"/> Child of Filipino immigrant <input type="checkbox"/> Ffiance(e) of Filipino immigrant <input type="checkbox"/> Brother/sister of former Filipino citizen <input type="checkbox"/> Co-sponsored immigrant <input type="checkbox"/> Spouse of co.-sponsored immigrant <input type="checkbox"/> Child of co.-sponsored immigrant <input type="checkbox"/> Principal immigrant <input type="checkbox"/> Spouse of principal immigrant <input type="checkbox"/> Child of principal immigrant <input type="checkbox"/> Special immigrant | | <input type="checkbox"/> Investor <input type="checkbox"/> Non-immediate relative of foreign or Filipino citizen <input type="checkbox"/> Child of foreign national <input type="checkbox"/> Non-immediate descendant of foreign citizen <input type="checkbox"/> Parent of former Filipino citizen <input type="checkbox"/> Parent of Filipino immigrant <input type="checkbox"/> Adopted child <input type="checkbox"/> Veteran <input type="checkbox"/> De facto relationship <input type="checkbox"/> Others <input type="checkbox"/> Spouse of former Filipino citizen <input type="checkbox"/> Fiance(e) of former Filipino citizen <input type="checkbox"/> Child of the spouse of a former Filipino citizen | |
| FOR CFO USE ONLY | | Recruiting Agency Address of Recruiting Agency | |
| ENCODER | | DATE OF ENCODING | |
| | | CERTIFICATION I hereby certify under penalty of law to the truth and the correctness of the statement and that this form was accomplished by me personally or under my personal direction. _____ Printed Name and Signature | |