

THIS FORM IS NOT FOR SALE



Republic of the Philippines
Philippine Statistics Authority
OFFICE OF THE CIVIL REGISTRAR GENERAL
APPLICATION FORM - BIRTH CERTIFICATE

PSA-CRS

IMPORTANT: PLEASE READ GENERAL INSTRUCTIONS BEFORE FILLING OUT THE FORM

1. Please PRINT letters in the spaces provided. Please CHECK (✓) appropriate box(es).
2. A valid ID is required for both owner & requester of document.
3. An authorization is required from representative upon filing of the application.

Request for: BIRTH CERTIFICATE AUTHENTICATION BIRTH CARD CDLI

Number of copies: One Two Others (Specify) _____

Birth Reference No. BRn (if known) _____ Sex: Male Female

OWNER'S PERSONAL INFORMATION (For married female, please use maiden name)

Last Name _____

First Name _____

Middle Name _____

Date of Birth _____ MONTH _____ DAY _____ YEAR _____

Place of Birth _____ City / Municipality _____ Province _____ Country _____

Please specify country if born abroad only: _____

NAME OF FATHER

Last Name _____

First Name _____

Middle Name _____

MAIDEN NAME OF MOTHER

Last Name _____

First Name _____

Middle Name _____

REGISTERED LATE?
Check (✓) appropriate box No Yes When: _____

Requester's Tax Identification No. (TIN) (if known) _____

PLEASE TURN TO BACK PAGE →

FOR PSA USE ONLY
TRANSACTION NUMBER: _____

PURPOSE: Choose one and check (✓) appropriate box

Claim Benefits / Loan Employment (Local) School Requirements

Passport / Travel (Specify Country: _____) Others (Specify): _____

Employment (Abroad) (Specify Country: _____)

REQUESTER'S INFORMATION

Last Name, _____ First Name _____ M.I. _____

Mailing Address _____ House No. _____ Street Name / Barangay _____

City / Municipality _____ Province _____

Tel. No. _____

NOTE: AUTHORIZATION and ID of the document owner together with the requester's ID are required if the requester is NOT any of the following:

- a. the owner of the document;
- b. his/her parent;
- c. his/her spouse;
- d. his/her direct descendant;
- e. his/her legal guardian/institution-in-charge, if minor.

I understand that as per PD 603 (Child & Youth Welfare Code), birth certificate documents, if available in this office, cannot be released to me without proper authorization from the owner of the document, his/her parent (if minor), his/her spouse, his/her direct descendant, or his/her authorized guardian/institution-in-charge.

Signature of Requester _____

FOR PSA USE ONLY

Date of Filing _____ MONTH _____ DAY _____ YEAR _____

Date of Release _____ MONTH _____ DAY _____ YEAR _____

Remarks: _____

Converted? Y N

For CDLI request only:
CDLI type: Proper _____ pages
 Attachment _____ pages

Received by _____ Date of Receipt: _____

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