



**CONSULATE GENERAL OF THE
REPUBLIC OF THE PHILIPPINES
DUBAI and the N. EMIRATES**

**REPORT OF BIRTH
CHILD BORN ABROAD OF PHILIPPINE PARENT OR PARENTS**

_____ (Place and Date of Report)

Name of Child in Full _____ Sex _____
Date of birth _____, 20____; hour _____ m _____
Place of birth (in full) _____
Civil status of parents _____

FATHER

MOTHER

Full name _____
Nationality _____ Religion _____
Date of birth _____
Occupation _____
Present Residence _____
Birth place _____
Naturalized (if Foreign born) _____
Registered as Philippine citizen at _____
on _____
Passport No. _____ issued by _____
dated _____ valid to _____
Precise periods and places of Philippine residence:

Full name _____
Name before marriage _____
Nationality _____ Religion _____
Date of birth _____
Occupation _____
Present Residence _____
Birth place _____
Naturalized (if Foreign born) _____
Registered as Philippine citizen at _____
on _____
Passport No. _____ issued by _____
dated _____ valid to _____
Precise periods and places of Philippine residence:

Place and date of marriage _____
Number of previous children _____ Number now living _____
Name and address of Physician or nurse _____

(Signature of parent, physician or nurse)

**(WHEN REPORTED BY MAIL, SIGN IN THE
PRESENCE OF TWO WITNESSES)**

Declare to in our presence this _____
day of _____ 20____
at _____
(Witness) _____
(Witness) _____
(Address) _____
(Address) _____

(WHEN REPORTED IN PERSON, USE THIS FORM)

Subscribed and sworn to before me this _____
day of _____ 20____
at _____
_____ of the Philippines.
(SEAL)

CONSULATE GENERAL OF THE REPUBLIC OF THE PHILIPPINES

At _____
_____ 20____

The foregoing information was furnished by (father, mother, physician, nurse) and supported by (affidavit, physician's certificate from local authorities). This report has been executed in triplicate copy issued to parents, copy transmitted to the Department of Foreign Affairs, Manila and placed in the files of this office.

REMARKS _____

