



**APPLICATION FOR REGISTRATION**

(Voter's Registration Record upon approval by the ERB)

**Application No.**

**Precinct No.**

.....

.....

**Instructions :** (1) Accomplish separately in three copies; (2) print legibly; (3) check the appropriate box.

**PART 1 PERSONAL INFORMATION (To be filled out by Applicant)**

<b>NAME</b> Last ..... First ..... Middle .....		<input type="checkbox"/> Illiterate <input type="checkbox"/> Disabled Assisted by: _____ <b>SEX</b> <input type="checkbox"/> Male <input type="checkbox"/> Female _____ Height    _____ Weight
<b>RESIDENCE/ADDRESS</b> Province ..... City/Municipality .....    Barangay ..... House No./ Street .....		<b>DATE OF BIRTH</b> ..... - ..... - ..... Month    Day    Year <b>PLACE OF BIRTH</b> City/Mun ..... Province .....
<b>CITIZENSHIP</b> _____ <input type="checkbox"/> By birth <input type="checkbox"/> Naturalized <input type="checkbox"/> Reacquired <small>(if naturalized/reacquired, state date of naturalization/reacquisition and Certificate Number of naturalization/order of approval of reacquisition)</small> Date of Naturalization/Reacquisition    Month    Day    Year    Certificate No./Order of Approval		<b>CIVIL STATUS</b> <input type="checkbox"/> Single <input type="checkbox"/> Widow/er <input type="checkbox"/> Married <input type="checkbox"/> Legally Separated Name of Spouse, if married _____
<b>PERIOD OF RESIDENCE</b> in the City / Mun    No. of Years    No. of Months    in the Philippines    No. of Years		
<b>PROFESSION/OCCUPATION</b> _____ <b>TIN</b> ..... - ..... - .....		

COPY FOR THE CENTRAL FILE

<b>NAME OF FATHER</b> Last ..... First ..... Middle .....	<b>NAME OF MOTHER</b> Last ..... First ..... Middle .....
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**PART 2 THUMBPRINTS / SPECIMEN SIGNATURES**

I do solemnly swear that the above statements regarding my person are true and correct; that I possess all the qualifications and none of the disqualifications of a voter; that I have no pending application for registration in any city/municipality; and that I am not registered in any precinct in the Philippines.

Date    Month    Day    Year    \_\_\_\_\_  
 Signature of Applicant

Left Thumb

Right Thumb

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

EO / Administering Officer  
(Signature above Printed Name)

**PART 3 ACTION BY THE ELECTION REGISTRATION BOARD**

Approved    Month    Day    Year    \_\_\_\_\_    With precinct assignment No.    .....

Disapproved    Date    \_\_\_\_\_    Reason for disapproval    \_\_\_\_\_

\_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_  
 Member    Chairman of the Board    Member  
 Signature above Printed Name    Signature above Printed Name    Signature above Printed Name

**PART 4 VOTER IDENTIFICATION NUMBER (To be filled out by Election Officer)**

CITY/MUN DISTRICT CODE			PRECINCT NO.				NAME CODE			
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
PROV CODE			PRECINCT NO.				DATE OF BIRTH			
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

**ACKNOWLEDGEMENT RECEIPT**

**Application for Registration**

Last .....  
 First .....  
 Middle .....

**Application No.**    .....

This is to acknowledge receipt of your Application subject to approval/disapproval of the Election Registration Board/(ERB). You need not to appear in the ERB hearing unless required through a written notice.

\_\_\_\_\_    EO/Interviewer Signature