Republic of the Philippines
COMMISSION ON ELECTIONS
Intramuros, Manila

REVISED CEF - 1

Instruction : **Fill-in completely and legibly the appropriate spaces and check appropriate choice/s in ovals.**

◯ **APPLICATION FOR REGISTRATION** (Accomplish Personal Information at the back)

Note: (For Applicant/s with existing Registration Records)

I, _____, Filipino, born on _____, a duly registered voter in Precinct No. _____ of Barangay _____, City/Municipality of _____, Province of _____, do HEREBY APPLY FOR: (Check appropriate box/es)

◯ **APPLICATION FOR TRANSFER OF REGISTRATION RECORD**

◯ within the same City/Municipality/District ◯ from another City/Municipality/District (Accomplish Personal Information at the back).

My New Residence is:
House No. & Street _____
Barangay_____City/Municipality_____Province_____
I have resided in my new residence for _____ years and for _____ months.

◯ **APPLICATION FOR REACTIVATION OF REGISTRATION RECORD**

Reason for Deactivation:

◯ 1. Sentenced by final judgment to suffer imprisonment for not less than one (1) year;
◯ 2. Convicted by final judgment of a crime involving disloyalty to the duly constituted government, etc;.
◯ 3. Declared by competent authority to be insane or incompetent;
◯ 4. Failed to vote in two (2) successive preceding regular elections;
◯ 5. Loss of Filipino citizenship; or
◯ 6. Exclusion by a court order.
◯ 7. Failure to Validate

That said ground no longer exists, as evidenced by the attached certification/order of the court (in cases of 1,2,3,5, and 6).

◯ **APPLICATION FOR CHANGE OF NAME DUE TO MARRIAGE OR COURT ORDER/CORRECTION OF ENTRIES IN THE VOTERS' REGISTRATION RECORD**
(Attach required supporting documents such as Certified Copy or Certificate of Court Order or Certificate of Live Birth, and others)

Present Data/Information: _____
New/Corrected Data/Information:_____

◯ **APPLICATION FOR INCLUSION OF RECORDS IN THE BOOK OF VOTERS / REINSTATEMENT OF NAME IN THE LIST OF VOTERS**

◯ Inclusion of VRR in the precinct book of voters

◯ Reinstatement of the name of the registered voter which has been omitted in the list of voters

I do hereby request that my name which has been omitted in the list of voters/my registration record which has not been included in the precinct book of voters of Precinct No. _____, be reinstated/included therein. The said reinstatement of name/inclusion of registration record is necessary and valid.

IN WITNESS WHEREOF, I hereunto affix my signature this ____ day of _____ , 20_____ at _____, Province of _____, Philippines.

_____
Signature above printed name

SUBSCRIBED AND SWORN to before me on the above date.

_____
EO/Administering Officer

Application No.

Precinct No.

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

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

NAME

Last

First

Middle

☐ Illiterate ☐ Person with Disability

☐ Indigenous People

Assisted by: _____

(Please fill-up Supplemental Data Form/Assistor's Oath)

RESIDENCE/ADDRESS Province

City/Municipality Barangay

House No. / Street

SEX

☐ Male ☐ Female

DATE OF BIRTH

Month Day Year

PLACE OF BIRTH

City/ Mun _____

Province _____

CITIZENSHIP _____ ☐ By Birth ☐ Naturalized ☐ Reacquired

(If naturalized/reacquired, state date of naturalization/reacquisition and Certificate Number of naturalization/order of approval of reacquisition)

Date of Naturalization/ Reacquisition Month Day Year

Certificate No. /Order of Approval _____

PERIOD OF RESIDENCE

In the City/Mun No. of Years No. of Months

In the Philippines No. of Years

CIVIL STATUS

☐ Single

☐ Married

Name of Spouse, If Married

_____

PROFESSION / OCCUPATION

_____

TIN

PART 2 OATH

☐ REGISTRATION ☐ TRANSFER

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 and that I am ☐ not registered in any precinct or ☐ registered in a precinct of another City/Municipality/District in the Philippines. Further, I give consent to the processing of the Information stated herein by the Commission on Elections for registration, election and other purposes as may be provided by law including B.P. Blg. 881, R.A. No. 8189, R.A. No. 10367 and R.A. 10173 also known as the Data Privacy Act of 2012.

Date Month Day Year

_____
Signature of Applicant
Above Printed Name

_____
EO / Administering Officer
(Signature above Printed Name)

ROLLED THUMBPRINTS / SPECIMEN SIGNATURES

Left Thumb Right Thumb

1 _____

2 _____

3 _____

Part 3 ACTION BY THE ELECTION REGISTRATION BOARD

☐ Approved Month Day Year

☐ Disapproved DATE

With Precinct Assignment No.

Reason for disapproval _____

_____
Member
(Signature above Printed Name)

_____
Chairman of the Board
(Signature above Printed Name)

_____
Member
(Signature above Printed Name)

Part 4 VOTER'S IDENTIFICATION NUMBER *(To be filled out by Election Officer)*

Part I

Prov Code City/Mun/ Dist. Code

Part II

Precinct Assignment

Part III

Month Day Year Name Code

Birth Code

Type of Application

◯ Registration
◯ Transfer
◯ Reactivation
◯ Transfer with Reactivation
◯ Change of Name/Correction of Entry
◯ Reinstatement/Inclusion

Application for Registration

Last

First

Middle

ACKNOWLEDGEMENT RECEIPT

Application No.

This is to acknowledge receipt of your application. Your application is subject for Approval/Disapproval by the Election Registration Board (ERB). You need not appear in the ERB hearing unless required through a written notice.

Date of ERB Hearing _____

_____
EO/ Interviewer Signature above Printed Name

Republic of the Philippines
COMMISSION ON ELECTIONS
Intramuros, Manila

REVISED CEF - 1

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Application No.

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Last

First

Middle

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Assisted by:

(Please fill-up Supplemental Data Form/Assistor's Oath)

RESIDENCE/ADDRESS Province

City/Municipality Barangay

House No. / Street

CITIZENSHIP ☐ By Birth ☐ Naturalized ☐ Reacquired

(If naturalized/reacquired, state date of naturalization/reacquisition and Certificate Number of naturalization/order of approval of reacquisition)

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☐ Male ☐ Female

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Month Day Year

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Date Month Day Year

Signature of Applicant
Above Printed Name

EO / Administering Officer
(Signature above Printed Name)

ROLLED THUMBPRINTS / SPECIMEN SIGNATURES

Left Thumb Right Thumb

1

2

3

Part 3 ACTION BY THE ELECTION REGISTRATION BOARD

☐ Approved Month Day Year

☐ Disapproved DATE

With Precinct Assignment No.

Reason for disapproval

Member
(Signature above Printed Name)

Chairman of the Board
(Signature above Printed Name)

Member
(Signature above Printed Name)

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Precinct Assignment

Part III

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Above Printed Name

EO / Administering Officer
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ROLLED THUMBPRINTS / SPECIMEN SIGNATURES

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