



REPORT OF BIRTH

CHILD BORN ABROAD OF FILIPINO PARENT/S

PHILIPPINE CONSULATE GENERAL, CHICAGO

DATE OF REPORT

ID #

DO NOT LEAVE ANY SPACES BLANK. INDICATE N/A IF NOT APPLICABLE.

DETAILS OF CHILD'S BIRTH

1. CHILD'S LAST NAME	<input type="text"/>	5. DATE OF BIRTH (day-month-year)	<input type="text"/>
2. CHILD'S FIRST NAME	<input type="text"/>	6. TIME OF BIRTH	<input type="text"/> () AM () PM
3. CHILD'S MIDDLE NAME (MOTHER'S MAIDEN NAME)	<input type="text"/>	7. SEX	() MALE () FEMALE
4. PLACE OF BIRTH	<input type="text"/>	8. CIVIL STATUS OF PARENTS: (AT THE TIME OF BIRTH OF THE CHILD)	() MARRIED () NOT MARRIED

DETAILS OF BIRTH PARENTS (at the time of child's birth)

	INFORMATION ON BIRTH FATHER	INFORMATION ON BIRTH MOTHER
9. LAST NAME	<input type="text"/>	<input type="text"/>
10. FIRST NAME	<input type="text"/>	<input type="text"/>
11. MIDDLE NAME	<input type="text"/>	<input type="text"/>
	12. MAIDEN SURNAME	<input type="text"/>
13. CITIZENSHIP (AT THE TIME OF BIRTH OF THE CHILD)	<input type="text"/>	<input type="text"/>
14. DATE OF BIRTH (day-month-year)	<input type="text"/>	<input type="text"/>
15. PLACE OF BIRTH	<input type="text"/>	<input type="text"/>
16. OCCUPATION	<input type="text"/>	<input type="text"/>
17. RELIGION	<input type="text"/>	<input type="text"/>
18. HOME ADDRESS AND TELEPHONE NUMBER	<input type="text"/>	<input type="text"/>
19. NATURALIZED (if foreign born)	<input type="text"/>	<input type="text"/>
20. DATE AND PLACE OF REGISTRATION AS PHILIPPINE CITIZEN (day-month)	<input type="text"/>	<input type="text"/>
21. DATE OF MARRIAGE (day-month-year)	<input type="text"/>	24. PLACE OF MARRIAGE <input type="text"/>
22. NUMBER OF PREVIOUS CHILDREN	<input type="text"/>	25. NUMBER OF CHILDREN NOW LIVING <input type="text"/>
23. SIGNATURE OF PARENT, PHYSICIAN OR NURSE OVER PRINTED NAME		<input type="text"/>

WHEN REPORTED BY MAIL, USE THIS PORTION IN THE PRESENCE OF TWO WITNESSES

Declared in our presence this ____ day of _____ at _____

First Witness: _____
Address : _____

Second Witness : _____
Address : _____

WHEN REPORTED IN PERSON, USE THIS PORTION

Subscribed and sworn to before me this ____ day of _____
_____ at the Philippine Consulate General, Chicago.

SEAL

REPUBLIC OF THE PHILIPPINES

EMBASSY/CONSULATE OF THE REPUBLIC OF THE PHILIPPINES

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

DATE : _____

SERVICE NO. : _____

O.R. NO. : _____

FEE PAID : \$25.00

SEAL

REPUBLIC OF THE PHILIPPINES

REQUIREMENTS

- Report of Birth form accomplished in two (2) originals and three photocopies.
- Original or certified true copy and four (4) copies of the following:
 - Child's Birth Certificate
 - Proof of citizenship of parent(s) at the time of child's birth such as:
 - Philippine passport issued at the time of child's birth
 - Certificate of Naturalization of parent(s), if applicable
 - Alien registration card (green/pink card) or U.S. visa, if applicable
 - Marriage Certificate of parents
- Original and four (4) copies of Oath of Allegiance and Order of Approval for Dual Citizenship of Filipino parent, *if child acquired Philippine citizenship as a derivative beneficiary under R.A. 9225.*
- Two (2) originals and two (2) photocopies of Notarized Affidavit of Delayed Registration, *if Report of Birth is filed more than twelve (12) months after the child's birth.*
- Processing fee of \$25.00 (*non-refundable and payable in cash if personally applying, or money order, cashier's check or bank draft payable to the Philippine Consulate General if applying by mail. Personal checks, personal money orders and credit cards are not accepted.*)

NOTE:

The Consular Officer reserves the right to require additional documents from the applicant.

Only Birth Certificates from the following states are accepted by the Consulate:

<i>Arkansas</i>	<i>Mississippi</i>
<i>Illinois</i>	<i>Missouri</i>
<i>Indiana</i>	<i>Nebraska</i>
<i>Iowa</i>	<i>North Dakota</i>
<i>Kansas</i>	<i>Ohio</i>
<i>Louisiana</i>	<i>Oklahoma</i>
<i>Michigan</i>	<i>South Dakota</i>
<i>Minnesota</i>	<i>Wisconsin</i>

APPLICATION BY MAIL

Report of Birth sent by mail must be duly notarized and sent to the Philippine Consulate General with a self-addressed return envelope with postage stamps for USPS priority mail with delivery confirmation. Please do not use P.O. Box mailing address.

AFFIDAVIT FOR DELAYED REGISTRATION

OF

BIRTH **MARRIAGE** **DEATH**

(To be accomplished by either the father/mother/guardian or the person himself if 18 years old and above)

I, _____ of legal age, single/married and with residence and postal address at _____.
After having duly sworn to in accordance with law, do hereby depose and say:

1. That I am the applicant for the delayed registration of birth/marriage/death of _____.
2. That I/he/she was born on _____ in _____.
3. That I/he/she am/is a citizen of the Philippines.
4. That the reason for the delay in registering the birth/marriage/death was due to _____.

Signature

SUBSCRIBE AND SWORN to before me this ___ day of _____ 201__.

Notary Public