



Republic of the Philippines
COMMISSION ON ELECTIONS

APPLICATION FOR REGISTRATION

(Voters Registration Record upon approval by the ERB)

Application No.

[Grid for Application No.]

Precinct No.

[Grid for 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)

Name

Last

[Grid for Last Name]

First

[Grid for First Name]

Middle

[Grid for Middle Name]

Illiterate Person with Disability

Assisted by: _____
(Please fill-up Assistor's Oath)

Gender Male Female

Height _____ Weight _____

RESIDENCE/ADDRESS

Province [Grid]

City/Municipality

Barangay

[Grid for City/Municipality and Barangay]

House No. / Street

[Grid for House No. / Street]

DATE OF BIRTH

[Grid for 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

[Grid for Date of Naturalization/ Reacquisition]

CIVIL STATUS

Single Widow/er

Married Legally Separated

Name of Spouse, if married _____

PERIOD OF RESIDENCE

No. of Years No. of Months No. of Years

In the City / Mun [Grid] in the Philippines [Grid]

PROFESSION / OCCUPATION _____ TIN [Grid]

NAME OF FATHER

Last

[Grid for Father's Last Name]

First

[Grid for Father's First Name]

Middle

[Grid for Father's Middle Name]

NAME OF MOTHER

Last

[Grid for Mother's Last Name]

First

[Grid for Mother's First Name]

Middle

[Grid for Mother's Middle Name]

Part 2 OATH

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 disqualification 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 [Grid] - [Grid] - [Grid]

Month Day Year

Signature of Applicant
Above Printed Name

EO / Administering Officer
(Signature above Printed Name)

ROLLED THUMBPRINTS / SPECIMEN SIGNATURES

[Box for Left Thumbprint]

Left Thumb

[Box for Right Thumbprint]

Right Thumb

1. _____ 2. _____ 3. _____

Part 3 ACTION BY THE ELECTION REGISTRATION BOARD

Approved [Grid]

With precinct assignment No. [Grid]

Disapproved Date Reason for disapproval _____

Member
(Signature above Printed Name)

Chairman of the Board
(Signature above Printed Name)

Member
(Signature above Printed Name)

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

CITY/MUN/
DISTRICT CODE

[Grid for City/Mun/District Code]

Prov Code

PRECINCT NO.

[Grid for Precinct No.]

Month

Day

Year

[Grid for Date of Birth]

DATE OF BIRTH

COPY FOR THE PROVINCIAL FILE



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Assisted by: _____
(Please fill-up Assistor's Oath)

Gender Male Female

Height _____ Weight _____

RESIDENCE/ADDRESS

Province [Grid]

City/Municipality

Barangay

[Grid for City/Municipality and Barangay]

House No. / Street

[Grid for House No. / Street]

DATE OF BIRTH

[Grid for 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 [Grid]

Certificate No./Order of Approval

CIVIL STATUS

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Married Legally Separated

Name of Spouse, if married _____

PERIOD OF RESIDENCE

No. of Years No. of Months No. of Years

In the City / Mun [Grid] in the Philippines [Grid]

PROFESSION / OCCUPATION _____

TIN [Grid]

NAME OF FATHER

Last

[Grid for Father's Last Name]

First

[Grid for Father's First Name]

Middle

[Grid for Father's Middle Name]

NAME OF MOTHER

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Month Day Year

Signature of Applicant
Above Printed Name

EO / Administering Officer
(Signature above Printed Name)

ROLLED THUMBPRINTS / SPECIMEN SIGNATURES

[Box for Left Thumbprint]

Left Thumb

[Box for Right Thumbprint]

Right Thumb

1. _____ 2. _____ 3. _____

Part 3 ACTION BY THE ELECTION REGISTRATION BOARD

Approved

Month Day Year [Grid]

With precinct assignment No.

[Grid for Precinct Assignment No.]

Disapproved

Date

Reason for disapproval _____

Member
(Signature above Printed Name)

Chairman of the Board
(Signature above Printed Name)

Member
(Signature above Printed Name)

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

CITY/MUN/
DISTRICT CODE

[Grid for City/Mun/District Code]

Prov Code

PRECINCT NO.

[Grid for Precinct No.]

Month

Day

Year

[Grid for Date of Birth]

DATE OF BIRTH

COPY FOR THE CENTRAL FILE