



REPUBLIC OF THE PHILIPPINES  
DEPARTMENT OF FOREIGN AFFAIRS  
**REPORT OF BIRTH**

Date of report  
(day-month-year)

CHILD BORN ABROAD OF FILIPINO PARENT/S

Foreign Service Post:  BERNE  GENEVA

**DETAILS OF CHILD'S BIRTH**

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

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

	INFORMATION ON CHILD'S FATHER	INFORMATION ON CHILD'S 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	<input type="text"/>	<input type="text"/>
14. MODE OF ACQUISITION	<input type="text"/>	<input type="text"/>
(by birth or naturalization)		
15. DATE OF BIRTH	<input type="text"/>	<input type="text"/>
(day-month-year)		
16. PLACE OF BIRTH	<input type="text"/>	<input type="text"/>
17. OCCUPATION	<input type="text"/>	<input type="text"/>
18. RELIGION	<input type="text"/>	<input type="text"/>
19. HOME ADDRESS	<input type="text"/>	<input type="text"/>
20. DATE OF MARRIAGE	<input type="text"/>	24. PLACE OF MARRIAGE <input type="text"/>
(day-month-year)		
21. NUMBER OF PREVIOUS CHILDREN	<input type="text"/>	25. NUMBER OF CHILDREN NOW LIVING <input type="text"/>
22. SIGNATURE OVER PRINTED NAME & ADDRESS OF PARENT/S		
<input type="text"/>		

WHEN REPORTING 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 REPORTING IN PERSON, USE THIS PORTION:

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ at the Embassy of the Philippines in \_\_\_\_\_.

SEAL REPUBLIC OF THE PHILIPPINES

**EMBASSY/ CONSULATE GENERAL OF THE REPUBLIC OF THE PHILIPPINES**

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

Date: \_\_\_\_\_  
Service No. \_\_\_\_\_  
O.R. No.: \_\_\_\_\_  
Fee Paid: \_\_\_\_\_

SEAL

REPUBLIC OF THE PHILIPPINES