

**Embassy of the Philippines
Athens, Greece**

**APPLICATION FORM
CITIZENSHIP RETENTION AND REACQUISITION
SUPPLEMENT FOR DEPENDENT
(under R.A. 9225)**

I, _____, _____ years of age,

Full name of the Petitioner on the Dependents Birth Certificate

citizen of _____, with contact number _____, after being

sworn to in accordance with law, hereby declare under oath that:

1. I am the petitioner in the above Petition for Retention/Reacquisition of Philippine Citizenship Under Republic Act No. 9225.
2. I am including in my petition my unmarried child under 18 years of age pursuant to Section 4 of R.A. 9225, to with:

Affix colored ID photograph
(sized 2" x 2") with white
background.
Photograph must be taken
within the last three months
from the date of application.
Subject must not wear
eyewear (e.g. eyeglasses,
sunglasses, colored contacts)
or headwear.

Name:

Name as appears on the Birth Certificate

Also known as:

Name as appears on the Foreign Passport

Date of Birth: _____ Age: _____ Sex: _____

Nationality: _____ Valid Passport No.: _____

Date of Issuance: _____ Place of Issuance: _____

Father's Name:

Mother's Name: _____

Petitioner's Signature Over Printed Name

Embassy of the Philippines
Athens, Greece
APPLICATION FORM
CITIZENSHIP RETENTION AND REACQUISITION
(under R.A. 9225)

Affix colored ID photograph
(sized 2" x 2") with white
background.
Photograph must be taken
within the last three months
from the date of application.
Subject must not wear
eyewear (e.g. eyeglasses,
sunglasses, colored contacts)
or headwear.

Affix colored ID photograph
(sized 2" x 2") with white
background.
Photograph must be taken
within the last three months
from the date of application.
Subject must not wear
eyewear (e.g. eyeglasses,
sunglasses, colored contacts)
or headwear.

Affix colored ID photograph
(sized 2" x 2") with white
background.
Photograph must be taken
within the last three months
from the date of application.
Subject must not wear
eyewear (e.g. eyeglasses,
sunglasses, colored contacts)
or headwear.

Print all information legibly. Do not leave spaces blank. Indicate "N/A," "NONE," or "DO NOT KNOW" as appropriate.
Mark appropriate box with "✓".

I. PERSONAL DATA

1. Last Name: _____
First Name(s): _____
Middle Name¹: _____
2. Birthdate: _____ 3. Place of Birth: _____
4. Civil Status: Single Married Divorced 5. Sex: Male
 Widowed Legally Separated Female
6. Nationality: _____ 7. Height (Meters): _____ 8. Weight (Kg): _____
9. Permanent Philippine Address: _____

10. Address Abroad: _____

11. Phone No. : _____ 12. Mobile No. : _____
13. E-Mail Address: _____
14. Name of Spouse: _____ 15. Nationality: _____
16. Applicant's Father's Name: _____
17. Father's Nationality: _____ 18. Father's Birthdate: _____
19. Applicant's Mother's Name: _____
20. Mother's Nationality: _____ 21. Mother's Birthdate: _____

II. FOREIGN CITIZENSHIP

22. Current Foreign Citizenship: _____ Mode of Acquisition: _____
23. Date of Acquisition: _____ Naturalization Certificate No.: _____
24. Foreign Passport No.: _____ Date & Place of Issue: _____

III. UNMARRIED CHILDREN AGED BELOW 18 YEARS INCLUDED AS DEPENDENTS IN THIS PETITION

Name	Relationship	Date of Birth	Age

¹ Mother's maiden surname, for unmarried applicants.

Philippine Embassy
Athens, Greece

CERTIFICATION

I hereby certify under oath that all the information in this general application form, consisting of two pages, including this page on which this Certification is written, are true and correct information about myself as an applicant. I further warrant that I have complied with all the requirements of the Philippine Embassy in Athens, Greece and the Bureau of Immigration with respect to my application for the issuance of an Identification Certificate (I.C.) and that I submitted duly certified copies of documents issued under the official seal of the officer having legal custody of their originals in the Philippines and foreign documents with their official translation in English duly authenticated by the consular official in the Foreign Service of the Philippines in the foreign country in compliance with the requirements of the Bureau of Immigration. I understand that my application will not be processed by the Bureau if it finds any statement herein to be false, if any document submitted is found to have been falsified, or if I fail to comply with all the requirements of the Bureau of Immigration with respect to my application/petition without prejudice to whatever action(s) the Philippine Embassy in Athens, Greece or the Bureau of Immigration shall take in accordance with applicable laws of the Republic of the Philippines.

Date Executed: _____ 2023
Place Executed: **Athens, Greece**

(Applicant's Signature over Printed Name)

Consular Section)
Embassy of the Philippines) S.S.
Athens, Greece)

SUBSCRIBED AND SWORN to before me this ____th day of _____ 2023 at Athens, Greece.

Doc No :
Page No. :
Book No. :
Series No. :
Service No. :
O.R. No. :
Fee : €55.00

Signature Over Printed Name
of Administering Embassy/Consular Official