



Warning and Directions:

1. Indicate "N/A" if Not Applicable. Do not leave any space blank. Print all information.
2. Application forms not properly accomplished will be summarily denied.
3. Giving of false information by the applicant/representative is a basis for summary denial of application.
4. Only CSEZFP Registered Enterprise Accredited Representatives are allowed to represent applicants.
5. The CERTIFICATION on page 3 is an integral part of this general application form. An application unaccompanied by the Certification will be summarily denied. All documents submitted to CEZA must conform to the representations in the Certification.

attach
2 x 2 colored photo
of applicant

DATE OF ENTRY IN THE PHILIPPINES: Mo. _____ Day ____ Year _____

VISA/PERMIT APPLIED FOR:

- CEZA INVESTOR'S RESIDENT VISA (CIRV) ALIEN EMPLOYMENT PERMIT (AEP)
 CEZA WORKING VISA (CWV) Others, Specify: _____

PERSONAL DATA

NAME:				
(Last Name)	(First Name)	(Middle Name)		
Sex: Male _____ Female _____	Age _____ yrs.	Height: _____ cm.	Weight: _____ kg.	
Place of Birth: _____		Date of Birth: _____		Nationality: _____
FATHER'S NAME:				
(Last Name)	(First Name)	(Middle Name)		
MOTHER'S NAME:				
(Last Name)	(First Name)	(Middle Name)		

APPLICANT'S RESIDENCE FOR THE LAST FIVE (5) YEARS (List present address first):

Address	From	To

APPLICANT'S LAST ADDRESS OUTSIDE THE PHILIPPINES FOR A PERIOD EXCEEDING ONE (1) YEAR:

Address	From	To



CIVIL STATUS: Single Married Divorced/Legally Separated Separated in fact

NAME OF SPOUSE: _____

Place of Birth: _____ Date of Birth _____ Citizenship _____ Age _____

CHILDREN (Unmarried children below twenty-one (21) years of age):

Table with 4 columns: Name, Age, Place/Date of Birth, Sex. Contains 6 empty rows for data entry.

Use additional sheet if necessary

APPLICANT'S EMPLOYMENT FOR THE LAST FIVE (5) YEARS (List present employment first)

Table with 4 columns: Name of Employer/Address, Occupation, From, To. Contains 6 empty rows for data entry.

LANGUAGES SPOKEN ASIDE FROM NATIVE LANGUAGE:

1. _____ 2. _____ 3. _____

PASSPORT NO. _____

Place Issued: _____

Date Issued: _____

Valid Up To: _____

Applicants Authorized Representative: _____

CEZA Accreditation Number: _____

CHARACTER REFERENCES IN THE PHILIPPINES:

Name: _____

Address: _____

Contact No.: _____



Applications for:

- Applications for: CEZA INVESTOR'S RESIDENT VISA (CIRV), CEZA WORKING VISA (CWV), ALIEN EMPLOYMENT PERMIT (AEP), Others, Please Specify: _____

NAME OF PETITIONING COMPANY: _____
ADDRESS OF PETITIONER: _____

Date of Incorporation: _____
Name of Petitioner's representative: _____
Position in the company: _____
Position to be occupied by alien in the company: _____
Job to be performed by the alien in the company: _____
Primary Purpose of the company: _____
Alien Employment Permit Number: _____ Valid Until: _____
Duration of Employment Contract: _____
[True Copy of the contract is attached.]
Reason for alien's employment/engagement: _____

CERTIFICATION

I hereby certify under oath that all the information in this general application form consisting of three (3) pages, including the page on which this Certification is written contains true and correct information about myself as an applicant. I further warrant that I have complied with all the requirements of the Cagayan Economic Zone Authority (CEZA) with respect to my application/our petition for _____, for the change of status to _____ and that I have 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 Consul/Embassy official in the foreign service of the Philippines in the foreign country, in compliance with the requirements of CEZA. I understand that my application can be denied summarily by CEZA if any statement herein is found to be false, if any document submitted is found to have been falsified, or if I fail to comply with all the requirements of CEZA with respect to my application/our petition without prejudice to whatever recourse CEZA shall take in accordance with applicable laws in the Republic of the Philippines.

Date Executed: _____
Place Executed: _____

(Applicant's/Representative's Signature over Printed Name)

CTC/ACR/Passport No. _____
Place of Issue: _____
Date of Issue: _____

Republic of the Philippines
City/Province of _____) S.S.

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ day of _____ in the City/Province of _____ AFFIANT EXHIBITING TO ME HIS/HER CTC/ACR/Passport No. _____ issued at _____ on _____ 20__.

NOTARY PUBLIC
Until December 31, 20__
PTR No. _____
IBP O.R. No. _____