Republic of the Philippines

Philippine Statistics Authority

OFFICE OF THE CIVIL REGISTRAR GENERAL

**APPLICATION FORM – BIRTH CERTIFICATE**

**PSA COPY**

Number of Copies: One Two Others (Specify):\_\_\_\_\_\_\_

Sex: Male

Female

**Owner’s Personal Information *(For Married Female, Please use Maiden Name)***

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PLACE OF BIRTH

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**NAME OF FATHER**

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MIDDLE NAME

**MAIDEN NAME OF MOTHER**

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Contact Number:

*Purpose:*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_