



REPUBLIC OF THE PHILIPPINES  
PHILIPPINE STATISTICS AUTHORITY  
PhilSys Registration Form 1A



**FOR 5 YEARS OLD AND ABOVE**

Please read the instructions at the back before filling out this form. Print all information in **CAPITAL** letters and use **BLACK** ink only. Place an "X" mark on the applicable items.

THIS INFORMATION WILL BE PRINTED ON THE PHILID CARD	<b>1 NAME</b>													
	(FIRST NAME)		(MIDDLE NAME)											
	(LAST NAME)		(SUFFIX)											
	<b>2 SEX</b>		<b>3 DATE OF BIRTH</b>											
	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		<table border="1"> <tr> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>-</td><td>M</td><td>M</td><td>-</td><td>D</td><td>D</td> </tr> </table>		Y	Y	Y	Y	-	M	M	-	D	D
	Y	Y	Y	Y	-	M	M	-	D	D				
	<b>4 PLACE OF BIRTH</b>													
	(CITY/MUNICIPALITY)		(PROVINCE)											
	(COUNTRY)													
	<b>5 BLOOD TYPE</b>		<b>6 FILIPINO OR RESIDENT ALIEN</b>											
	TYPE: _____ <input type="checkbox"/> UNKNOWN		<input type="checkbox"/> FILIPINO <input type="checkbox"/> RESIDENT ALIEN											
	<b>7 MARITAL STATUS (OPTIONAL)</b>													
<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED <input type="checkbox"/> LEGALLY SEPARATED <input type="checkbox"/> ANNULLED <input type="checkbox"/> NULLIFIED														
<b>8 A. PERMANENT ADDRESS</b>														
(RM/FLR/UNIT NO. BLDG NAME)		(HOUSE/LOT/BLOCK NO.)												
(STREET)		(SUBDIVISION)												
(BARANGAY)		(CITY/MUNICIPALITY)												
(PROVINCE/STATE)		(COUNTRY)												
<b>B. PRESENT ADDRESS (OPTIONAL)</b> <input type="checkbox"/> SAME AS PERMANENT ADDRESS														
(RM/FLR/UNIT NO. BLDG NAME)		(HOUSE/LOT/BLOCK NO.)												
(STREET)		(SUBDIVISION)												
(BARANGAY)		(CITY/MUNICIPALITY)												
(PROVINCE)		(COUNTRY)												
<b>9 MOBILE NUMBER (OPTIONAL)</b>		<b>10 EMAIL ADDRESS (OPTIONAL)</b>												
PhilSys notification will be sent through the provided mobile number.		PhilSys notification will be sent through the provided email address.												
<b>11 SUPPORTING DOCUMENT/S PRESENTED</b> (Indicate the document/s presented as listed at the back of the Form.)														
TYPE OF DOCUMENTS		BReN/ID Number/ACR I-Card Number												
1														
2														
<b>12 MODE OF PHILID DELIVERY</b>														
<input type="checkbox"/> DELIVER TO PERMANENT ADDRESS		<input type="checkbox"/> DELIVER TO PRESENT ADDRESS												

**DISCLOSURE UNDER SECTION 12 OF DATA PRIVACY ACT OF 2012 (RA No. 10173):**

I hereby declare that I am fully aware that the above data shall be used for securing a PhilSys Number (PSN) under the Philippine Identification System, issuance of PhilID, authentication and/or updating my demographic and biometric information in the PhilSys Registry. I trust that the above information shall remain confidential, hence, I give my consent that the same data be accessed for subsequent validation, verification, and other purposes consistent with the objectives of the PSA under RA No. 11055. I further affirm that all statements/information appearing in this registration form are made by me, true, correct, and complete to the best of my knowledge and belief.

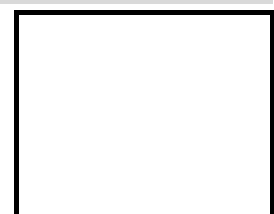
(FOR the Applicant who CANNOT SIGN, AFFIX fingerprints in the presence of a PhilSys Registration Personnel.)

\_\_\_\_\_  
APPLICANT'S SIGNATURE OVER PRINTED NAME  
(Must be signed in the presence of a PhilSys Registration Personnel)

\_\_\_\_\_  
DATE



LEFT THUMB



RIGHT THUMB

**FOR THE USE OF THE PHILIPPINE STATISTICS AUTHORITY ONLY. PLEASE DO NOT WRITE BELOW THIS LINE.**

SCREENER	ENCODER	BIOMETRIC EXCEPTIONS	
		(To be filled out by the Supervisor)	
		<input type="checkbox"/> FRONT FACING PHOTOGRAPH	<input type="checkbox"/> IRIS SCAN
		<input type="checkbox"/> FINGERPRINTS	<input type="checkbox"/> Left Iris
		Specify: _____	<input type="checkbox"/> Right Iris
SIGNATURE OVER PRINTED NAME	SIGNATURE OVER PRINTED NAME	SIGNATURE OVER PRINTED NAME	DATE:

## INSTRUCTIONS

- A. THIS FORM IS TO BE FILLED OUT WITH INFORMATION OF THE APPLICANT AGES FIVE (5) YEARS OLD AND ABOVE.  
 B. FILL-OUT THIS FORM IN ONE (1) COPY. AVOID ERASURES AND ALTERATIONS. LINE OUT OR STRIKE THROUGH ANY ERRONEOUS ENTRY ONCE AND PUT YOUR INITIALS ABOVE THE ERASURE.  
 C. PLACE AN "X" MARK ON THE APPLICABLE ITEMS.  
 D. FILL-OUT THE APPROPRIATE ITEMS IN THE SPECIFIED FORMAT.  
 E. IF A REQUIRED FIELD IS NOT APPLICABLE, INDICATE "N/A" OR "NOT APPLICABLE".

**1. NAME** Indicate your Full Name starting from your First Name, Middle Name, Last Name, and Suffix.

**Example:** **JUAN SANTOS DELA CRUZ JR**  
 (FIRST NAME) (MIDDLE NAME) (LAST NAME) (SUFFIX)

**2. SEX** Place an "X" mark on the selected box.

**Example:**  MALE  FEMALE

**3. DATE OF BIRTH** Fill in Date of Birth in YYYY-MM-DD

**Example:** **1983-09-10**  
 (YYYY-MM-DD)

**4. PLACE OF BIRTH** For Filipino citizen, indicate the name of the City/Municipality and Province of your Place of Birth.

**Example:** **SAN JUAN METRO MANILA PHILIPPINES**  
 (City/Municipality) (Province) (Country)

For Resident Alien, indicate the Country of your Place of Birth. Leave the City/Municipality blank

**Example:** **N/A N/A USA**  
 (City/Municipality) (Province) (Country)

**5. BLOOD TYPE** Indicate your Blood Type. If unknown, put an "X" mark on the box provided.

**Example: Type:** **AB+**  
 UNKNOWN

**6. FILIPINO OR RESIDENT ALIEN** Place an "X" mark on the selected box if Filipino or Resident Alien.

**Example:**  FILIPINO  RESIDENT ALIEN

**7. MARITAL STATUS (OPTIONAL)** Place an "X" mark on the selected box.

**Example:**  SINGLE  MARRIED  WIDOWED  DIVORCED  LEGALLY SEPARATED  
 ANNULLED  NULLIFIED

**Note: If a married woman presenting a supporting document reflecting her maiden name but chooses to use her married name, she must present a PSA - issued Certificate of Marriage.**

**8. A. PERMANENT ADDRESS** Indicate your complete address.

**B. PRESENT ADDRESS (OPTIONAL)**

**Example:**

**A. PERMANENT ADDRESS**

**Rm 143 Block 143 ATIS MASAYA MALIGAYA QUEZON CITY METRO MANILA PHILIPPINES**  
 (Rm/Flr/Unit No. Bldg Name) (House/Lot/Block No) (Street) (Subdivision) (Barangay) (City/Municipality) (Province) (Country)

**B. PRESENT ADDRESS (OPTIONAL)**

**3rd Flr Lot 123 ARAW MASAGANA MAPAYAPA MAKATI METRO MANILA PHILIPPINES**  
 (Rm/Flr/Unit No. Bldg Name) (House/Lot/Block No) (Street) (Subdivision) (Barangay) (City/Municipality) (Province) (Country)

**For Resident Alien, indicate the Permanent Address that you are using in your country and the Present Address here in the Philippines.**

**Example:**

**A. PERMANENT ADDRESS**

**Unit 143 Lot 5 APPLE CALIFORNIA USA**  
 (Rm/Flr/Unit No. Bldg Name) (House/Lot/Block No) (Street) (Subdivision) (Barangay) (City/Municipality) (Province/State) (Country)

**B. PRESENT ADDRESS (OPTIONAL)**

**3rd Flr Block 5 IRIS PSA MAAYOS ANTIPOLLO RIZAL PHILIPPINES**  
 (Rm/Flr/Unit No. Bldg Name) (House/Lot/Block No) (Street) (Subdivision) (Barangay) (City/Municipality) (Province) (Country)

**9. MOBILE NUMBER (OPTIONAL)** Indicate your primary Mobile Number. In case the applicant is a minor, the Mobile Number of the parent or guardian may be indicated.

**Example: MOBILE NUMBER (Optional) 0918XXXX991**

PhilSys notification will be sent through the provided mobile number only

**10. EMAIL ADDRESS (OPTIONAL)** Indicate your active Email Address. Email address is not case sensitive and small letters will be accepted by the screener.

**Example: EMAIL ADDRESS (Optional) philsys@psa.gov.ph**

PhilSys notification will be sent through the provided email address only

**11. SUPPORTING DOCUMENT/S PRESENTED** Write the name of the supporting documents presented. Refer to the list of supporting documents below.

**BReN/ID Number/ACR I-Card Number** Write the BReN, ID Number and ACR I-Card Number

**Example:**

<b>SUPPORTING DOCUMENT/S PRESENTED</b>	<b>BReN/ID Number/ACR I-Card Number</b>
1. PSA-issued Certificate of Live Birth	<b>BReN 123XXXXXXXXXX</b>
2. Postal ID	<b>ID No. 123XXXXXXXXXX</b>

**12. MODE OF PHILID DELIVERY**

- DELIVER TO PERMANENT ADDRESS Put an "X" mark on the box if you want your PhilID card to be delivered at your Permanent Address.  
 DELIVER TO PRESENT ADDRESS Put an "X" mark on the box if you want your PhilID card to be delivered at your Present Address.

### SUPPORTING DOCUMENTS

The duly accomplished application form shall be supported by presenting an original copy of any of the following PRIMARY supporting documents:

1. PSA-issued Certificate of Live Birth AND one (1) government-issued identification document with full name, photo and signature or thumbmark
2. DFA-issued Philippine Passport
3. GSIS or SSS-issued Unified Multi-Purpose Identification (UMID) Card
4. LTO-issued Student's License Permit or Non-Professional/Professional Driver's License

If the above-mentioned documents are not available, present an original copy of any of the following SECONDARY supporting documents:

- |   |   |
|---|---|
| <ol style="list-style-type: none"> <li>1. PSA-issued Certificate of Live Birth / NSO-issued Certificate of Live Birth with Birth Reference Number (BReN)</li> <li>2. LCRO-issued Certificate of Live Birth</li> <li>3. PSA-issued Report of Birth</li> <li>4. PSA-issued Certificate of Founding</li> <li>5. Integrated Bar of the Philippines (IBP) ID</li> <li>6. Professional Regulation Commission (PRC) ID</li> <li>7. Seaman's Book</li> <li>8. Overseas Workers Welfare Administration (OWWA) OFW e-card/iDOLE OFW ID</li> <li>9. Senior Citizen Identification Card</li> <li>10. Social Security System (SSS) ID</li> <li>11. Pantawid Pamilyang Pilipino Program (4Ps) ID</li> </ol> | <ol style="list-style-type: none"> <li>12. License to Own or Possess Firearms (LTOPF)</li> <li>13. National Bureau of Investigation (NBI) Clearance</li> <li>14. Police Clearance</li> <li>15. Solo Parent ID</li> <li>16. Person With Disability (PWD) ID</li> <li>17. Voter's ID</li> <li>18. Postal ID</li> <li>19. Taxpayer Identification Number (TIN) ID</li> <li>20. PhilHealth ID</li> <li>21. Philippine Retirement Authority (PRA)- issued Special Resident Retiree's Visa (SRRV)</li> <li>22. National ID from other countries</li> <li>23. Residence ID from other countries</li> </ol> |
|---|---|

The following secondary supporting documents **MUST** have a front-facing photograph, signature/thumbmark, full name, permanent address, and date of birth to be accepted:

- |   |   |
|---|---|
| <ol style="list-style-type: none"> <li>24. Employee ID</li> <li>25. School ID</li> <li>26. Barangay Clearance/Barangay Certificate</li> </ol> | <ol style="list-style-type: none"> <li>27. Barangay ID</li> <li>28. City/Municipality ID</li> </ol> |
|---|---|

**For Resident Aliens:**

1. Valid Foreign Passport; and Alien Certificate of Registration (ACR)
2. Alien Certificate of Registration (ACR) or Alien Certificate of Registration Identification Card (ACR i-Card)

**For Stateless Persons and Refugees:**

1. Certificate of Recognition issued by Refugees and Stateless Persons Protection Unit (RSPPU) of the Department of Justice (DOJ)

**THIS FORM IS NOT FOR SALE**