

BI FORM CGAF-001-Rev 2 This document may be reproduced and is **NOT FOR SALE CONSOLIDATED GENERAL APPLICATION FORM** FOR IMMIGRANT VISA

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Note: If the applicant has more than two (2) children, use BI Form 2014-00-005 Rev 0.

APPLICANT'S ACR I-CARD CLAIM STUB

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BI FORM CGAF-001-Rev 2 CONSOLIDATED GENERAL APPLICATION FORM FOR IMMIGRANT VISA

[IF THE ACR I-CARD IS CLAIMED BY AN AUTHORIZED REPRESENTATIVE, PLEASE SEE REVERSE SIDE FOR INSTRUCTIONS.]

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CERTIFICATION

I/We certify that: (1) All the information in the application is truthful, complete and correct; (2) All documents are authentic and were legally obtained from the corresponding government agencies or private entities; (3) I/We understand that my/our application may be summarily denied if: (a) Any statement is false; (b) Any document submitted is falsified; or (c) I/We fail to comply with all the BI requirements without prejudice to whatever action the BI may take; and (4) I/We have not filed this or any similar application before any office of the Bureau.

Date [DD-MMM-YYYY e.g. 01 JAN 1990]	Petitioner's Signature ove	Printed Name A	Applicant's Signature over Printed Name						
		I-CARD WILL ONLY BE RELEASED U	JPON COMPLIANCE/SUBMISSION OF THE	IE FF:					
Name of Representative	111100	ocopy of passport bio-page of the ACR							
Accredited Travel Agency/Law Office _		ID of either parent claiming the ACR I copy of the BI-Accreditation ID card, it							
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Contact No	pare	nt or BI accredited entity							
Residential /Office Address	ACR I-C	Card Holder:							
Signature		Signature over PRINTED NA [Please call (+632) 525-7557 to	NAME Signature 57 to check the status of your application]Page 2						