



**Registry of Civil Status  
Application for Vital  
Record(s)**

<i>For Official Use</i>	
Application Clerk: _____	Time: _____
Cashier's Signature: _____	
Amt: _____	Time: _____
Receipt No.: _____	

**1. Applicant's Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to the subject: Self  Mother  Father  Sister  Brother  Other: \_\_\_\_\_

Residential Address: \_\_\_\_\_ Employment Address: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Email Address: \_\_\_\_\_

NIC #: \_\_\_\_\_ Form of ID: \_\_\_\_\_

**2. Subject's Information**

Contact #: \_\_\_\_\_

Residential Address: \_\_\_\_\_ Employment Address: \_\_\_\_\_

Last Name:

First Name:

Middle Name(s): \_\_\_\_\_

Date of Birth (dd/mm/yy): \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_ Sex: (F/M): \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Mother's alias: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Father's alias: \_\_\_\_\_

**3. Type of Certificate**

Citation: \_\_\_\_\_

	Number of copies	Regular/Expedited	
Birth:	_____	(\$8.00/\$13.00 per copy)	
Baptism:	_____	(\$8.00/\$13.00 per copy)	Regular/Expedited
Death:	_____	enter date of death (dd/mm/yy) _____	(\$5.00/\$10.00 per copy)
Burial:	_____	enter date of burial (dd/mm/yy) _____	(\$6.00/\$11.00 per copy)
Adoption:	_____	enter date of adoption (dd/mm/yy) _____	(\$8.00/\$13.00 per copy)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Received by: \_\_\_\_\_ ID #: \_\_\_\_\_

**Registrar's Rectification:**

**I hereby Authorize the Registrar/Adjudicator of the Civil Status Registry to Amend/Rectify (if necessary) the above mentioned vital record(s) of the subject.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_