
REQUEST FOR ASSISTANCE
Embassy of the Philippines
New Delhi, India

OVERSEAS FILIPINO WORKERS

NAME: _____
PASSPORT NO: _____ DATE OF ISSUE: _____ PLACE OF ISSUE: _____
DATE OF BIRTH: _____ PLACE OF BIRTH: _____
ADDRESS IN THE PHILIPPINES: _____
ADDRESS IN INDIA: _____
NAME OF COMPANY/EMPLOYER: _____ JOB TITLE: _____
ADDRESS OF COMPANY/EMPLOYER: _____
TEL. NO. OF COMPANY/EMPLOYER: _____
NEXT OF KIN (NAME, ADDRESS & TEL. NO.): _____

ARRIVED IN INDIA ON: _____ VISA TYPE: _____
SALARY PER EMPLOYMENT CONTRACT: _____ ACTUAL SALARY: _____
ADDRESS/TEL. NO. OF AGENCY IN THE PHILIPPINES: _____
ADDRESS/TEL. NO. OF AGENCY IN INDIA: _____

FILIPINOS MARRIED/ENGAGED TO INDIAN NATIONALS

NAME: _____
PASSPORT NO: _____ DATE OF ISSUE: _____ PLACE OF ISSUE: _____
DATE OF BIRTH: _____ PLACE OF BIRTH: _____
ADDRESS IN THE PHILIPPINES: _____
ADDRESS IN INDIA: _____
NAME OF SPOUSE/FIANCE: _____
TEL. NO. OF SPOUSE/FIANCE: _____
NEXT OF KIN (NAME, ADDRESS & TEL. NO.): _____

ARRIVED IN INDIA ON: _____ VISA TYPE: _____
DATE OF MARRIAGE: _____ MARRIAGE REPORTED AT EMBASSY (Y/N)? _____
CHILDREN (NAMES, AGE & PASSPORT HELD, i.e., PHILIPPINE OR INDIAN) _____

NATURE OF ASSISTANCE REQUESTED: _____

(Following page please)
