

**ASSISTANCE TO NATIONALS FORM**  
**Philippine Embassy in Vientiane, Lao PDR**

**A. APPLICANT'S CONTACT INFORMATION**

Last Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_  
First Name: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Middle Name: \_\_\_\_\_ Civil Status: \_\_\_\_\_  
Contact No.: \_\_\_\_\_ Spouse Name: \_\_\_\_\_  
Email: \_\_\_\_\_ FB Account: \_\_\_\_\_  
Passport no.: \_\_\_\_\_ Place of Issue: \_\_\_\_\_ Date of Issue: \_\_\_\_\_  
Date of Arrival in Laos: \_\_\_\_\_

**Address in the Philippines:**

\_\_\_\_\_

**Address in Laos:**

\_\_\_\_\_

**Dependents living in Laos:**

Name	Relationship	Age	Contact No./Email/FB Account
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Relatives living in the Philippines:**

Name	Relationship	Contact No./Email/FB Account
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Immigration Status:**

OFW  Tourist  Dependent of OFW  
 Others (Pls. specify)

**If OFW, Company/Employer of OFW please specify:**

Company Name/Employer of OFW: \_\_\_\_\_  
Position: \_\_\_\_\_  
Office Address: \_\_\_\_\_  
Office Telephone No.: \_\_\_\_\_

**POEA Registered:**  Yes  No POEA No.: \_\_\_\_\_  
**OWWA Registered:**  Yes  No  Expired OWWA No.: \_\_\_\_\_

**B. TYPE OF ASSISTANCE**

Legal  Shipment of Remains  Representation  
 Repatriation  Medical Assistance  Whereabouts  
 Others (Pls. specify): \_\_\_\_\_

**C. TYPE OF CASE**

Maltreatment  Unpaid Salary/Benefits/ESB  Debt/Unpaid loans  
 Illegal Recruitment/Human Trafficking  
 Others (Pls. specify): \_\_\_\_\_

**D. SUMMARY OF ASSISTANCE REQUESTED**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**E. ATTACHMENT/S SUBMITTED**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

1. The above statements are all true to the best of my knowledge and these statements were declared by me willfully and knowingly without coercion with anyone.
2. I will only transact business with Embassy officers that has the knowledge of my request for assistance.
3. The services rendered to me by the Embassy is free.
4. I am aware that any official fees that must be collected must be paid at the cashier with official receipt.

\_\_\_\_\_  
Signature & Date

**SWORN STATEMENT**

I, \_\_\_\_\_, a \_\_\_\_\_ citizen, male/female of legal age,  
with address at \_\_\_\_\_ after  
having duly sworn in accordance with law, do hereby depose and say:

1. That I am presently working at \_\_\_\_\_  
\_\_\_\_\_;
2. That \_\_\_\_\_  
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**Assistance requested:**

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\_\_\_\_\_

Affiant further sayeth none.

**IN WITNESS WHEREOF**, I have hereunto affixed my signature this \_\_\_\_ day of \_\_\_\_\_ at the Philippine Embassy, Vientiane, Lao People’s Democratic Republic.

\_\_\_\_\_  
Affiant

**SUBSCRIBE AND SWORN TO** before me this \_\_\_\_ day of \_\_\_\_\_ in Vientiane, Lao PDR, affiant exhibited to me his/her \_\_\_\_\_ with No. \_\_\_\_\_ issued on \_\_\_\_\_ at \_\_\_\_\_.

Document No. :  
Service No. :  
Fee :  
O.R No. :  
Series of :  
Date :