

PHILIPPINE NATIONAL POLICE

ID APPLICATION FORM (PNP PERSONNEL)



PNP ID Application Form-2014A (NOT FOR SALE)

* dotted box must be filled-up legibly

| Fill in all applicable spaces correctly and legibly. Mark all appropriate boxes with X. | | | | | | | | Control No. | | | | |
|---|---|---|----------------|---|---|--|---|--------------|---|--------------------------------|------------|--|
| CATECORY | Police Commissioned Officer | Officer Non-Co | | | ficer | | Non-Uniformed I | | Personnel | | | |
| CATEGORY: | New ID | Renewal / Update | | | D | | Repla | · ID | | | | |
| PERSONAL D | ATA: | | | | | | | | | | | |
| Last Name: | First | Name: | ••••• | | ••••• | ••••• | Middle Nam | ne: | | | Qualifier: | |
| Present Unit Assignment (| Position for NUP): | •••••• | ••••• | •••••• | ••••• | ••••• | | ************ | •••••• | •••••• | | |
| Home Address: | | ************ | *********** | *************************************** | *************************************** | ********* | | *********** | *************************************** | ******** | | |
| Date of Birth (MM-DD-YYY) | r): | | Badg | e no.: | •••••• | *********** | TIN (Tax Id | No.): | | | | |
| Weight: | Height: | | | Color of Eyes: | | | | Colo | r of Hair: | | | |
| Blood type: Other Identifying Marks: Contact no. | | | | | | | | | | | | |
| Person to be notified in case of emergency: | | | | | Email address: | | | | | | | |
| Name: | | | | | | ı | Relationship: | | | | | |
| Address of person to be no | otified: | *************************************** | ************** | •••••••••••• | ••••••••• | | | CP N | lo.: | ••••• | | |
| Date accomplished: I hereby declare under the penalty of law that the entries made herein are true and correct, and executed to the best of my knowledge. | | | | | | | | | | | | |
| I also authorize the PNP/authorized representative to verify/validate the contents stated herein. (Please affix your signature and right thumb mark at the boxes indicated below) | | | | | | | | | | | | |
| Signature of Applicant Right Thumb N | | | | | | Marl | white background and the name should appear below the picture (Last Name, First Name, M.I. & below is the rank). Picture should be without headgear, without moustache, eye glasses or sun glasses. Must wear PNP GOA without necktie (for police), Monday uniform for NUPs. | | | | | |
| (in black ball pen) REQUIREMENTS: INSTRUCTIONS: | | | | | | | | | | | | |
| (1). Application Form endorsed by the Chief, RPHRDD (PRO), Chief, ARMD (NSU) or the Admin/Pers Officer of the unit where they were appointed. (2). Duly accomplished application form. (NOTE: Police Personal File & Authenticated Copy of Appointment Order must be submitted/encoded in the PAIS first before new appointees are issued ID Cards) b. RENEWAL (1.) Application Form endorsed by COP/PD/CD/Bn Comdr; C, RPHRDD/ARMD; Regional Chief, to | | | | | | Submit duly accomplished application form & required documents to the COP/PD/CD/Bn Comdr; C, RPHRDD/ARMD; Regional Chief, NOSU/NASU or Pers/Admin Officer of NHQ Offices/Directorates for verification/confirmation of entries and signature. The application signed by the COP/PD/CD/Bn Comdr; C, RPHRDD/ARMD; Regional Chief, NOSU/NASU or Pers/Admin Officer of NHQ Offices/Directorates will be forwarded to the Records Management Division (RMD), DPRM thru their liaison officer or by | | | | | | |
| NOSU/NASU or Pers/Admin Officer of NHQ Offices/Directorates. (2.) Duly accomplished application form. | | | | | mail/commercial courier. 3. All applications sent by mail/commercial courier must have a pre-paid return envelope. | | | | | | | |
| (3.) Old/Expired ID (NOTE: For newly-promoted PNCOs from PROs and NSUs, authenticated copy of promotion order must be submitted by their C, RPHRDD/ARMD prior to issuance of ID Card) c. REPLACEMENT (lost/dilapidated) (1.) Application Form endorsed by COP/PD/CD/Bn Comdr; C, RPHRDD/ARMD; Regional Chief, | | | | | 4. Regular Processing Period: Walk-in: Minimum Three (3) hours Mailed/by courier: 2-3 days from receipt | | | | | | | |
| NOSU/NASU or Pers/Admin Officer of NHQ Offices/Directorates. (2.) Affidavit of loss (if lost) (3.) Police Report (4.) Dilapidated PNP ID (if dilapidated) (5.) Payment of 60.00 pesos for the replacement of lost/dilapidated ID card. | | | | | 5. Application forms with different/inconsistent data with PAIS Record/PPF will be verified separately; hence processing will be longer. 6. All printed IDs not claimed within 30 days will be sent to C, RPHRDD/ARMD; Personnel/Admin Officer of unit/office. | | | | | | | |
| | signed by immediate officer) reracity of the entries made herein and plicant: | VEF | RIFIED BY | <u>:</u> | | | | REVII | EWED BY: | | | |
| (ACTION OFFICER | | | | | | R - ID SECTION) | | | | (CHIEF, ID SECTION) ROVED BY: | | |
| (Signature over Printed Name) CHIEF OF UNIT/OFFICE OR PERSONNEL/ADMIN OFFICER PROCESSED BY: | | | | | | | | | | FOR TDPRM: | | |
| (RANK) CP No. : | (UNIT/OFFICE) | (ACTION OFFICER - ID SECTION) | | | | | | | | | | |