## **COVID-19 REPATRIATION REQUEST AND DECLARATION FORM**

I, currently residing at					age,
currently residing at requests the following repatriation assistance from the F					,
<ul> <li>Cost of Flight for Myself</li> <li>Cost of Flight for My Minor Children</li> <li>Voluntary Deportation (visas expired before 1</li> <li>Exit Visa (visas expired after 15 March 2020)</li> <li>Payment of Penalties</li> <li>Travel Document</li> </ul>	5 March 20	20)			
I also declare that I am unable to pay for the select as I was among those displaced by COVID-19 and that in I will return to the Philippines.					
I also declare the following as fact:					
Type of my visa: Type of visa of my children:					
My Philippine details:					
Final destination (city/town/mun Residential address				_ (provi	ince)
Email Facebook Name					
Mobile or other number Contact Person/Address/Mobile No	/		/		
I attach copies of:					
<ul> <li>My passport and  visa</li> <li>Passports and  visas of my minor children Name/s:</li> </ul>					
Signatur Name					

Date : \_\_\_\_\_, 2020 City/Country : \_\_\_\_\_/\_\_\_