



BI FORM NO. CCS-A-CDR-2016
REQUEST FOR CERTIFIED TRUE COPY OF
DEROGATORY RECORDS

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Instructions:

- 1. Use black ink only and do not leave any space blank. Write N/A if not applicable. Improperly/incompletely filled out application form will not be acted upon.
- 2. If the application is filed by an authorized representative, attach a photocopy of the Bureau of Immigration (BI) Accreditation Identification (ID) Certificate or an original Special Power of Attorney (SPA) for EACH applicant with a photocopy of a valid government-issued ID of attorney-in-fact.

SUBJECT'S PERSONAL INFORMATION

Last Name

First/Given Name

Middle Name

Other Name(s)/Alias(es)

1

2

Date of Birth [DD-MMM-YYYY e.g. 01 JAN 1990]

Gender ☐ M ☐ F

Place of Birth

Citizenship/Nationality

Residential/Registered Address in the Philippines

House/Unit No., Street, Subdivision/Village

Barangay, Municipality/City

Province, Zip Code

Passport Number

Contact Number(s) in the Philippines

Landline

Mobile

Documents to be certified:

Purpose:

Date [DD-MMM-YYYY e.g. 01 JAN 1990]

Signature over PRINTED NAME of the Requesting Party

Certification and Clearance Section (CCS) Window

RECEIVED: _____
Date & Time

RELEASED: _____
Date & Time

[To be filled out by Authorized BI Personnel Only]



CERTIFIED TRUE COPY OF DEROGATORY RECORDS CLAIM STUB

Name of SUBJECT [Last Name, First/Given Name, Middle Name]

Date of Birth [DD-MMM-YYYY e.g. 01 JAN 1990]

Citizenship/Nationality

- Always present this claim stub upon claiming your certificate.
- Unclaimed certificate shall be automatically cancelled after 30 days from the date of issuance.
- If claimed by an authorized representative, present a Special Power of Attorney (SPA) and original valid government-issued ID.

Date & Time FILED

Date & Time RELEASED