

## OFFICE OF THE SENIOR CITIZENS AFFAIRS (OSCA)

## **REGISTRATION FORM**

			REQUI	REMENTS:			
<ul><li>NEW</li><li>1. 2pcs 1x1 pictures</li><li>2. Xerox of Birth certificate or any valid ID with date of Birth</li></ul>		LOST  1. 1x1 picture  2. Xerox of Birth certificate or any valid ID with date of Birth  3. Affidavit of loss		REPLACEMENT  1. 2pcs 1x1 pictures  2. Xerox of Birth certificate or any valid ID with date of Birth  3. Surrender old ID or Booklet		TRANSFER  1. 2pcs 1x1 pictures  2. Xerox of Birth certificate or any valid ID with date of Birth  3. Cancellation cert.  4. Barangay Clearance	
NAME: _	Juan Sar	ntos Dela Cruz	AGE: _	0	_ SEX: _	Male	
DATE OF BIRTH:	2025-08-18			PLACE OF BIRTH: _		Malolos	
ADDRESS: _	House 12	23					
CIVIL STATUS:	Married			NAME OF	_ NAME OF _ HUSBAND/WIFE: _		
EDUCATIONAL _	College			HOSBANL	// VVIFE.		
ATTAINMENT:							
OCCUPATION / RETIRED:	Trabaho						
CONTACT PERSON_ N CASE OF EMERGENCY:	0912345	6789					
RELATIONSHIP:	Child						
	ler of any	OSCA ID issued					are true and correct, under the penalty of
					Signature or Thumb mark of Senior Citiz		rk of Senior Citizen
RECEIVED AND VER	IFIED BY:						
	DATE:						
ADDDOVED DV:				ISSUED BY:			
APPROVED BY: NEIL ZAPANT				ID ISSUED:			
Presiden		ident					
				BOOKLET:	Medicine: _		

Grocery: \_\_\_