



EARLY APPOINTMENT REQUEST FORM

<http://philippines.usembassy.gov>

Date/Time of Original Appointment	Confirmation Number	Passport No	Surname	Given Name	M. Name

Date of expected travel: _____ *VisaPoint PIN: _____

Reason for early appointment request: _____

(Should be identical for all applicants listed above)

If traveling for business, company name: _____

Specific information regarding need for early appointment: _____

Date of last interview: _____

Name of the requestor: _____ Signature: _____

Is the requestor a travel agent: ____ Yes ____ No Agency name: _____

Contact person: _____ email address: _____

Contact number: _____ Fax number: _____

Notes:

1) Request will not be granted if a valid local contact number is not provided.

2) *VisaPoint PIN must be provided if you scheduled your appointment through VisaPoint website.

3) Form must be completely filled out. Incomplete information will not be processed.

Please fax this request to (632) 523-1215. We respond to requests within five working days. If you do not hear from us within that period, you may assume that the request was not approved. Due to the high volume of communications received, we request that you do not call, fax or e-mail to follow-up.

FOR EMBASSY USE

Approve ____ Regret ____ Incomplete ____

Approved by: _____ New date/time: _____