

Approved by

Attach two colored 2x2 ID photo w/ white background

2022 PRESS ACCREDITATION FORM

FOREIGN MEDIA FOCAP VISITING JOURN	NALIST RENEWAL 2021 IPC # Date of application :
PERSONAL DATA	
	Rirth Date Gender
Name	
	I Female
Birth Place Citizenship	Status
l i	Single Separated/Divorced Married, Spouse name
Mobile Phone No. E-mail Address:	Designation/Position in agency(indicate if freelance)
Height (ft/m) Weight (lb/k) Home/Hotel Addr	ress in the Philippines
riolight (1871) - Weight (1876) - Florite/Floter Addi	is a sum of the sum of
Passport No. Issued at Issue	ed on Expiry date Visa No./Status Length of stay
1 1	
	
Expected places to visit in the Philippines:	
Exposited places to visit in the 1 milippines.	
COMPANY DETAILS	
COMPANY DETAILS	Declaration (Decition)
Media Agency Name of	Head of Office Designation/Position in agency (indicate if freelance)
	l
Office Address	Telephone No. Fax No.
Cinco / Idai oco	
	
Please check type of media organization you repre	<u> </u>
□ Newspaper □ Magazine	= 200001
□ News Agency □ Television	☐ Photo Agency ☐ Others (Specify)
In case of freelance journalist and correspondent w	who submit stories or photographs to more than one publication, please
list Media entities you are a frequent contributor.	· · · · · · · · · · · · · · · · · · ·
Contact neman in accessory are out of town	Mahila/Talanhana Na
Contact person in case you are out of town	Mobile/Telephone No
A COREDITATION REQUIREMENTS	ADDITIONAL DEGLIDEMENTS FOR MEW ADDITIONAL
ACCREDITATION REQUIREMENTS	ADDITIONAL REQUIREMENTS FOR NEW APPLICANT
1. Accreditation forms properly filled up.	AND FREELANCER
2. Letter of request from respective agencies	1. 5 bylined photos/articles (published not later than 3 mos., 2. Five (5) consecutive issues of newspaper or magazine
3. 2 pcs. 2'x2" colored pictures with white background	und 2. Five (3) consecutive issues of newspaper of magazine (for news publications not later than 3 mos.)
4. Copy of contract of employment (for local hire)	,
5. Photo copy of passport (pages 1& 2)	. 5
6. Letter / Endorsement from the country embassy	in Philippines
7. Health Declaration Form	
Note:	I hereby certify all above information are true and correct
ID's not claimed within two months after approval will no lor released.	nger be
Bearer of this ID must comply with all health and safety pro	
all coverages.	Signature of applicant
This part to be accomplished by accreditation officer	□ Media □ Media Services
Recommended Approval :	
Noted by :	2022 Control Number :
	Data laguad

Date Issued

Expiry Date