



MEMBER’S CHANGE OF INFORMATION FORM (MCIF)

Pag-IBIG MID NUMBER

HOUSING ACCOUNT NUMBER (if applicable)

INSTRUCTIONS

1. This form shall be accomplished in one (1) copy.

2. Accomplish the applicable portions to be changed/corrected only. Indicate N/A if not applicable.

3. Print all entries in BLOCK/CAPITAL LETTERS.

4. Submit duly accomplished form together with required supporting documents to any Pag-IBIG Branch nearest you.
- NOTE: Please submit photocopy of the documents depending on the information to be changed. The original or certified true copy of the said document shall be presented for authentication.

CHECK THE APPROPRIATE BOX/BOXES AND ACCOMPLISH ONLY THE APPLICABLE PORTION/S TO BE CHANGED/UPDATED

☐ Change of Membership Category

☐ Change/Correction of Name

☐ Correction of Date of Birth

☐ Change of Marital Status

☐ Change of Address/Contact Details

☐ Change of Employment Details

☐ Updating of Heirs

☐ Others (Please specify)

LAST NAMEFIRST NAMENAME EXTENSION (e.g., Jr., II)MIDDLE NAME

1. CHANGE OF MEMBERSHIP CATEGORY

FROM

TO

2. CHANGE/CORRECTION OF NAME (Last Name, First Name, Name Extension, Middle Name)

FROM

TO

3. CORRECTION OF DATE OF BIRTH

FROM (mm/dd/yyyy)

TO (mm/dd/yyyy)

4. CHANGE OF MARITAL STATUS

FROM

TO

FOR MARRIED WOMEN

☐ Use Husband's Surname

☐ Use Maiden Name – Husband's Surname

☐ Retain Maiden Name

SPOUSE (For Married Status)

Last NameFirst NameName ExtensionMiddle NameNo Middle Name

☐

DATE OF BIRTH (mm/dd/yyyy)

5. CHANGE OF ADDRESS/CONTACT DETAILS (Please accomplish portions to be changed only)

PERMANENT HOME ADDRESS

Unit/Room No. Floor Bldg. Name Lot No. Block No. Phase No. House No. Street Name Subdivision

BarangayMunicipality/CityProvince/State/Country (if abroad)Zip Code

PRESENT HOME ADDRESS

Unit/Room No. Floor Bldg. Name Lot No. Block No. Phase No. House No. Street Name Subdivision

BarangayMunicipality/CityProvince/State/Country (if abroad)Zip Code

PREFERRED MAILING ADDRESS

☐ Present Home Address

☐ Permanent Home Address

☐ Employer/Business Address

(Indicate country code if abroad)

COUNTRY+AREA CODE TELEPHONE NUMBER

Home

Cellphone

Business (Direct Line)

Business (Trunk Line)

Email Address

6. CHANGE OF EMPLOYMENT DETAILS

EMPLOYER/BUSINESS NAME

OCCUPATION

EMPLOYER/BUSINESS ADDRESS

Unit/Room No. Floor Bldg. Name Lot No. Block No. Phase No. House No. Street Name Subdivision

BarangayMunicipality/CityProvince/State/Country (if abroad)Zip Code

EMPLOYMENT STATUS

DATE EMPLOYED (Month, Year)

7. UPDATING OF HEIRS (Please use separate sheet, if necessary)

LAST NAMEFIRST NAMENAME EXTENSION (e.g. Jr., II)MIDDLE NAMENO MIDDLE NAME (Check if applicable only)RELATIONSHIPDATE OF BIRTH (mm/dd/yyyy)ADDITION/DELETION

☐

☐

8. OTHERS (Please specify)

FROM

TO

CERTIFICATION

I hereby certify that the information given, and all statements made herein are true and correct. Likewise, I hereby authorize Pag-IBIG Fund to collect record, organize, update/modify, consult, use, consolidate, block, erase or destruct my personal data as part of my information. I hereby affirm my right to: (a) be informed; (b) object to processing, (c) access, (d) rectify, suspend or withdraw my personal data; (e) damages; and (f) data portability pursuant to the provision of R.A. No. 10173 (Data Privacy Act of 2012).

Signature over Printed Name of Member

Date

THIS PORTION IS FOR Pag-IBIG USE ONLY

RECEIVED BYDATE

APPROVED BYDATE

THIS FORM MAY BE REPRODUCED. NOT FOR SALE.

CHECKLIST OF REQUIREMENTS

MEMBER	FILING THROUGH A REPRESENTATIVE
<p>A. <u>Change of Membership Category</u></p> <ul style="list-style-type: none">▪ Member's Change of Information Form (MCIF) (1 Original)▪ Valid ID acceptable to the Fund (1 Photocopy) <p>B. <u>Change/Correction of Name</u></p> <ul style="list-style-type: none">▪ For Change in name due to Marriage<ul style="list-style-type: none">- MCIF (1 Original)- Marriage Contract (1 Photocopy) issued by Philippine Statistics Authority (PSA)/National Statistics Office (NSO) or Local Civil Registry Office (LCRO)- Valid ID acceptable to the Fund (1 Photocopy)▪ For Change in name (for reason other than Marriage)<ul style="list-style-type: none">- MCIF (1 Original)- Birth Certificate (1 Photocopy) issued by PSA/NSO- Court Order granting petition of change of name (1 Photocopy) issued by Second Level Regional Trial Court- Valid ID acceptable to the Fund (1 Photocopy) <p>C. <u>Correction of Date of Birth</u></p> <ul style="list-style-type: none">▪ MCIF (1 Original)▪ Birth Certificate (1 Photocopy) issued by PSA/NSO▪ Valid ID acceptable to the Fund (1 Photocopy) <p>D. <u>Change of Marital Status</u></p> <ul style="list-style-type: none">▪ For Single to Married<ul style="list-style-type: none">- MCIF (1 Original)- Marriage Contract (1 Photocopy) issued by PSA/NSO or LCRO- Valid ID acceptable to the Fund (1 Photocopy)▪ For Married to Single (<i>legally married to reported spouse</i>)<ul style="list-style-type: none">- MCIF (1 Original)- Court Order (1 Photocopy) issued by Second Level Regional Trial Court- Valid ID acceptable to the Fund (1 Photocopy)▪ For Married to Single (<i>due to erroneous encoding</i>)<ul style="list-style-type: none">- MCIF (1 Original)- CENOMAR (1 Photocopy) issued by PSA/NSO- Valid ID acceptable to the Fund (1 Photocopy)▪ For Married to Widowed<ul style="list-style-type: none">- MCIF (1 Original)- Death Certificate of the deceased spouse (1 Photocopy) issued by PSA/NSO or LCRO- Valid ID acceptable to the Fund (1 Photocopy) <p>E. <u>Change of Address/Contact Details</u></p> <ul style="list-style-type: none">▪ MCIF (1 Original)▪ Valid ID acceptable to the Fund (1 Photocopy) <p>F. <u>Change of Employment Details</u></p> <ul style="list-style-type: none">▪ MCIF (1 Original)▪ Valid ID acceptable to the Fund (1 Photocopy) <p>G. <u>Updating of Heirs</u></p> <ul style="list-style-type: none">▪ MCIF (1 Original)▪ Valid ID acceptable to the Fund (1 Photocopy) <p>H. <u>Correction of Place of Birth/Mother's Maiden Name/Gender (Due to erroneous encoding)</u></p> <ul style="list-style-type: none">▪ MCIF (1 Original)▪ Birth Certificate (1 Photocopy) issued by PSA/NSO▪ Valid ID acceptable to the Fund (1 Photocopy)	<p>A. <u>Change of Membership Category</u></p> <ul style="list-style-type: none">▪ Member's Change of Information Form (MCIF) (1 Original)▪ Valid ID of both parties (1 Photocopy)▪ Authorization Letter (1 Original) <p>B. <u>Change/Correction of Name</u></p> <ul style="list-style-type: none">▪ For Change in name due to Marriage<ul 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