

APPLICATION FORM FOR ACCREDITATION

Pursuant to Sec. 108, RA 7160 and DILG Memorandum Circular No. 2001-89

Complete Name of Organization _____

Acronym _____

Mailing Address _____

Contact Number _____ Date Organized _____

Nature of the Organization:

Civil Society Organization _____ Private Sector Organization _____
People's organization _____ Chamber of Commerce / Chamber affiliates _____
Non-government organization _____ Business sector organization _____
Civic group _____
Professional association (specify profession) _____

Registering Agency (please check appropriate box/es)

Securities & Exchange Commission _____ Department of Labor & Employment _____
Cooperative Development Authority _____ Department of Social Welfare & Dev't _____
Housing & Land Use Regulatory Board _____ Presidential Commission for the Urban Poor _____
Others (please specify) _____

Sector/Group Served

Education _____ Business _____ Cooperative _____
Urban Poor _____ Religious _____ Disabled _____
Youth _____ Women _____ PUV/Transport _____
Livelihood _____ Professionals _____ Arts/Culture _____
Homeowners _____ Labor _____ Social Justice _____
Peace & Order _____ Charitable / Welfare _____ Health & Sanitation _____
Social / Cultural Development _____ Children / Minor _____
Others (specify) _____

Total Number of Members _____ Active Members _____ Inactive Members _____

Organizational Linkages

City _____ Regional _____ National _____ International _____
Name of entity where the organization is linked / affiliated _____

We would like to be a member of the following local special bodies:

City Development Council _____ Health Board _____ School Board _____
Pre-qualification, Bids & Award _____ People's Law _____ Peace and Order _____
Committee _____ Enforcement Board _____ Council _____
Others (specify) _____

In a separate sheet of paper, please write the following:

- Purposes / objectives of the association;
• Project financing (sources / schemes);
• List of current officers, their complete addresses and contact numbers;
• Annual accomplishment report of the immediately preceding year;
• List of Projects, identifying its beneficiaries, cost and status; and
• Financial statement of the immediately preceding year.

Together with the application, submit the following:

Resolution of the Board of Directors signifying intention to accredit
Certificate of registration with appropriate agency
List of members, their complete addresses and contact numbers

We hereby certify to the correctness of the above information.
(signature over printed name)

President Secretary
Date Accomplished: _____

Submit to the Office of Councilor Kristian Rome Sy
Chairperson, Committee on Accreditation
2/F Legislative Building, New City Hall, Mac Arthur Highway, Valenzuela City
Telephone No: 352-1000 loc. 1312