



OFFICE OF THE SANGGUNIANG BAYAN

APPLICATION FORM FOR ACCREDITATION TO SPECIAL BODIES

(Ordinance No. 1, s. 2019 – an ordinance providing for the empowerment of Civil Society Organizations (CSOs) in the Municipality of Itogon, Province of Benguet)

Name of Organization : _____
Registered Address : _____
Contact No : _____
Date Organized : _____
Date Registered : _____

Registering or Accrediting Agency: (Check appropriate box)

Registering Agency (Please check appropriate box)

- | | |
|--|---|
| <input type="checkbox"/> Securities and Exchange Commission (SEC) | <input type="checkbox"/> Department of the Interior and Local Government (DILG) |
| <input type="checkbox"/> Cooperatives Development Authority (CDA) | <input type="checkbox"/> National Commission on Indigenous Peoples (NCIP) |
| <input type="checkbox"/> Department of Labor and Employment (DOLE) | <input type="checkbox"/> National Housing Authority (NHA) |
| <input type="checkbox"/> Department of Social Welfare & Development (DSWD) | <input type="checkbox"/> Insurance Commission |
| <input type="checkbox"/> Department of Health (DOH) | <input type="checkbox"/> Housing and Land Use Regulatory Board (HLURB) |
| <input type="checkbox"/> Department of Agriculture (DA) | <input type="checkbox"/> Others (Please Specify) _____ |
| <input type="checkbox"/> Department of Agrarian Reform (DAR) | |

Organizational Level: (Please check appropriate box)

- Barangay-based
 Chapter
 Affiliate of a larger organization (Please identify larger organization) _____
 Others (Please specify) _____

Purpose/ Objective (Please use additional sheet if necessary)

Calendar Year _____

Projects	Costs	Beneficiaries	Status

Project Financing (sources or schemes)

Services the Organization provides or can participate in

Depending on your organization's technical area of expertise and scope of activity, which local special body are you most capable to be a member of?

- Local Development Council
 Local School Board
 Local Health Board
 Local Peace and Order Council

List of Members: (Use separate sheet)

- Within the LGU
 Outside of the LGU, if any

WE HEREBY CERTIFY to the correctness of the above information.

ATTESTED:

 (Name & Signature of the President)

 (Name & Signature of the Secretary)

Annex "A"

~Sample Letter of Application~

_____ Date

Vice Mayor _____
Presiding Officer, Sangguniang Bayan
Municipality of _____
Province of _____

Dear Vice Mayor _____:

In response to your Notice of Call for Accreditation, kindly be informed that _____ (Name of CSO) _____, with office address at _____, would like to seek for accreditation by that Sanggunian.

In support of this application are the following administrative requirements:

1. Duly accomplished Application Form for Accreditation;
2. Board Resolution;
3. Certificate of Registration issued by _____;
4. List of Current Officers and Members;
5. Original Sworn Statement stating that the CSO is an independent, non-partisan organization and that it will retain its autonomy while pursuing the advancement of the peoples' interest through its membership in a local special body, after satisfying all the requirements and set criteria, as stated in DILG Memorandum Circular No. _____ dated _____, and after securing a Certificate of Accreditation from the concerned Sanggunian;
6. CY _____ Annual Accomplishment Report;
7. CY _____ Financial Statement;
8. Profile indicating the purposes and objectives of our organization;
9. Copy of the Minutes of the CY _____ Meeting of the organization; and
10. For CSOs applying to be members of the Local School or Health Board: Photocopy of profiles of at least three (3) individuals in the organization that will verify their involvement in the health or education sector.

Very truly yours,

(Head of the Organization)