Republic of the Philippines

Department of Social Welfare and Development

**APPLICATION FOR AUTHORITY** **TO CONDUCT FUND CAMPAIGN**

**(PUBLIC SOLICITATION)**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| ***Status of Application:*** | ***Type of Applicant:*** |  |
| * New Application | * Government Agency |  |
| * Renewal (pls. indicate previous issued permit No. and Date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * Central Office * Attached Agency * Regional Office | * GOCC * State Universities/ Colleges |
| ***Scope/Coverage:***   * National * Regional (more than   1 city/municipality) | * NGO/CSO/Faith-based organization/Groups |  |
| * Person |  |

***Methodology to be used:***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I. Identifying Information**

|  |  |
| --- | --- |
| 1. Name of Person/Corporation/ Organization/ Association/Groups  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 1. Business Address:   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 3. Agency Head (If applicable)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 4. Position Title/Designation  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 5. Telephone/Cell phone/Fax Numbers  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 6. E-mail Address  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 7. Registration/Permit No: | 8. Date of Issuance of Registration/Permit |
| 71. SEC/CDA (or other applicable Government Registration) No:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 8.1 SEC/CDA (or other applicable Government Registration) Issued  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 7.2. DSWD Registration/License No.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 8.2. DSWD Registration/License Issued  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 9. Name and Designation of Local Government Head (Provincial, City/Municipality or Barangay Level) who endorsed the individual to apply for solicitation permit (applicable only during State of National emergency/Calamity):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

**II. Project Proposal** (Please attached accomplished DSWD-SB- PS-F-002: Project Proposal)

I/We, under pain of possible civil and/or criminal action, affirm that all information indicated on this application form and the supporting documents are completely true and correct, and devoid of any misrepresentation. I/We further acknowledge that the Department of Social Welfare and Development shall conduct monitoring and auditing review of the public solicitation and project implementation activities, and hereby bind myself/ourselves to extend full cooperation thereto. Finally, I consent to the use, promotion or otherwise posting by the DSWD of all relevant information on the solicitation efforts, project implementation and/or its progress for purposes of transparency, and to encourage similar efforts from the public.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature over Printed Name of the Applicant Individual,

Agency Head or Group’s Representative)

***Note***: Please use additional sheet/s, if necessary.