



Republic of the Philippines  
 Province of Pangasinan  
 Municipality of Manaoag

## OFFICE OF THE MUNICIPAL ASSESSOR

### CITIZEN'S CHARTER

<b><i>TYPE OF TRANSACTION/ FRONTLINE SERVICE</i></b>	<b><i>FEES</i></b>	<b><i>FORMS</i></b>	<b><i>PROCESSING TIME</i></b>	<b><i>RESPONSIBLE PERSON/SECTION</i></b>
A. PROVISION OF PRE-MARRIAGE COUNSELING SERVICE (PMC)			4 HOURS, 20 minutes	MYRNA DACANAY, RSW GRACE MENDOZA
B. PROVISION OF MARRIAGE COUNSELING SERVICE (MC)			3-4 HOURS	MYRNA DACANAY, RSW LYNIE ABAR
C. PROVISION OF MARITAL CRISIS COUNSELING (MCC)			2 DAYS (1-2 HOURS PER SESSION/DAY)	MYRNA DACANAY, RSW LYNIE ABAR
D. ISSUANCE OF				
1. SENIOR CITIZEN'S IDENTIFICATION CARD			15 DAYS	MYRNA DACANAY, RSW CRISTOPHER D. AQUINO LYNIE F. ABAR
2. PURCHASE SLIP FOR MEDICINE			15-20 MINUTES	MYRNA DACANAY, RSW CRISTOPHER D. AQUINO GRACE MENDOZA ERANIO CELI
3. BOOKLETS FOR			20-30 MINUTES	MYRNA

GROCERY/AGRICULTURAL SUPPLIES.				DACANAY,RSW CRISTOPHER D. AQUINO ERANIO CELI
E. ISSUANCE OF IDENTIFICATION CARD TO SOLO PARENTS AND PERSONS WITH DISABILITIES			5 DAYS	CRISTOPHER D. AQUINO -GRACE F. MENDOZA -ERANIO CELI
F. PREPARATION OF SOCIAL CASE STUDY REPORT FOR: 1. ASSISTANCE TO INDIVIDUALS IN CRISIS SITUATION (AICS)  2. PCSO REFERRALS, SOCIAL WELFARE INSTITUTIONS, COURT, CASES, (CICL)			7 WORKING DAYS  13 DAYS	LYNIE F. ABAR MYRNA A. DACANAY  LYNIE F. ABAR MYRNA A. DACANAY
G. PROVISION OF CERTIFICATE IF INDIGENCY OR REFERRAL			3-4 HOURS	LYNIE F. ABAR MYRNA A. DACANAY GRACE F. MENDOZA
H. PROVISION OF EMERGENCY SHELTER ASSISTANCE			3-5 DAYS	LYNIE F. ABAR MYRNA A. DACANAY
I. PROVISION OF DAY CARE SERVICE PROGRAM AND SUPPLEMENTAL FEEDING			2-3 HOURS	Day Care Workers
J. PANTAWID PAMILYA-UPDATES			10 MINUTES	Cristopher D. Aquino/LL Eranio G. Celi/LL Mary Grace V. Cacatian/ML John Paulo M. Arellano/ML John Carl C. Yalong/ML Katrin Mae P. Joves/SWA
K. PANTAWID PAMILYA-GRIEVANCES			5-10 DAYS	Cristopher D. Aquino/LL Eranio G. Celi/LL Mary Grace V. Cacatian/ML John Paulo M. Arellano/ML John Carl C. Yalong/ML Katrin Mae P. Joves/SWA

L. CASH CARD REPLACEMENT			<i>3-6 MONTHS</i>	Cristopher D. Aquino/LL Eranio G. Celi/LL Mary Grace V. Cacatian/ML John Paulo M. Arellano/ML John Carl C. Yalong/ML Katrin Mae P. Joves/SWA
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# MUNICIPAL SOCIAL WELFARE AND DEVELOPMENT OFFICE

## (CITIZEN'S CHARTER)

### **A. PROVISION OF PRE-MARRIAGE COUNSELING SERVICE (PMC)**

*A.1. ABOUT THE SERVICE: Provided to couples applying for marriage license where one or both parties are below 25 yrs. of age pursuant to Article 16 of the New Family Code.*

STEP	APPLICANT/CLIENT	OFFICE ACTIVITY	DURATION	PERSON IN CHARGE	FEES	FORMS
1.	Proceed MSWDO secure PMC Forms	Provide Instruction and PMC Forms	5 mins.	<b>GRACE F. MENDOZA – Admin. Aide</b>		
2.	Fill-up PMC Forms Submit to the in charge		1 hour	-do-		
3.	Attend PMC Session	PMC Session	3 hrs.	<b>MYRNA A. DACANAY – MSWDO</b> <b>LYNIE F. ABAR – SWO-I</b>		
4.	Receive PMC Certificate	Issue PMC Certificate	10 mins.	-do-		
5.	Proceed RHU for FP Session					

### **B. PROVISION OF MARRIAGE ENRICHMENT COUNSELING (MEC)**

*B.1. ABOUT THE SERVICE: Provided to couples who wanted opportunities and tools to make their marriage grow and inance marital relationship.*

STEP	APPLICANT/CLIENT	OFFICE ACTIVITY	DURATION	PERSON IN CHARGE	FEES	FORMS
1.	Proceed MSWDO	Interview Client/Give Schedule	30 mins.	<b>MYRNA A. DACANAY – MSWDO</b> <b>LYNIE F. ABAR – SWO-I</b>		
2.	Return as scheduled	Counseling Session	1-2 hrs.	<b>MYRNA A. DACANAY – MSWDO</b>		
3.	Draw Commitments	Discuss Commitments	30 mins.	<b>MYRNA A. DACANAY – MSWDO</b>		

### **C. PROVISION OF MARITAL CRISIS COUNSELING (MCC)**

*C.1. ABOUT THE SERVICE: Intervention which is either conjoint or individual sessions to couples who are unable to resolve differences and conflicts on their own.*

<b>STEP</b>	<b>APPLICANT/CLIENT</b>	<b>OFFICE ACTIVITY</b>	<b>DURATION</b>	<b>PERSON IN CHARGE</b>	<b>FEES</b>	<b>FORMS</b>
1.	Proceed MSWD Office	Initial Interview	15 mins.	<b>MYRNA A. DACANAY</b> – MSWDO <b>LYNIE F. ABAR</b> – SWO-I		
2.	Prepare for Counseling	- Counseling Session - Sharing/Discussion - Resolving of Conflict	1-2 hrs.	<b>MYRNA A. DACANAY</b> – MSWDO <b>LYNIE F. ABAR</b> – SWO-I		
3.	Follow-up Counseling	- Assessment of marital prob. if in need of deeper intervention	Another day 1-2 hrs.	<b>MYRNA A. DACANAY</b> – MSWDO <b>LYNIE F. ABAR</b> – SWO-I		

### **D. ISSUANCE OF SENIOR CITIZEN'S IDENTIFICATION CARD/ PURCHASE SLIP FOR MEDICINE, BOOKLETS FOR GROCERY/AGRICULTURAL SUPPLIES**

#### **D.1. SENIOR CITIZENS IDENTIFICATION CARD**

*ABOUT THE SERVICE: Provision of Identification Card to 60 yrs. old and above who are residents of*

*Manaoag, Pangasinan, as per RA 9257.*

<b>STEP</b>	<b>APPLICANT/CLIENT</b>	<b>OFFICE ACTIVITY</b>	<b>DURATION</b>	<b>PERSON IN CHARGE</b>	<b>FEES</b>	<b>FORM</b>
1.	- Proceed MSWDO - Bring Birth Cert. Or Baptismal Cert. - 2 copies of 1x1 Id pictures	- Initial Interview - Provide Application Form	10 mins.	<b>CRISTOPHER D. AQUINO</b> <b>GRACE F. MENDOZA</b> <b>ERAÑO G. CELI</b>		
2.	Accomplish Application Form	Assist in the filling of Form	15 mins.	-do-		
3.	Submit Accomplished form	Review Form	10 mins.	-do-		
4.	Claim ID Card (as scheduled)	Process the Application Form/Issue the approved ID Cards	2 days	-do-		

**D.2. MEDICINE PURCHASE SLIP FOR SENIOR CITIZENS**

**ABOUT THE SERVICE:** *Purchase Slip is provided to Senior Citizens by the OSCA (Office of the Senior Citizens Affairs) in coordination w/ MSWDO in order to avail of the 20% discount on the purchase of medicines as per RA 9257*

STEP	APPLICANT/CLIENT	OFFICE ACTIVITY	DURATION	PERSON IN CHARGE	FEES	FORM
1.	Present OSCA I.D. of Senior Citizen	Type / Accomplish purchase Slip	15 mins.	<b>CRISTOPHER D. AQUINO GRACE F. MENDOZA ERAÑO G. CELI</b>		
2.		For Signature of MSWDO	1 min.	<b>MYRNA A. DACANAY – MSWDO</b>		
3.	Claim Purchase Slip	Issue the accomplished purchase slip	2 mins.	<b>MSWD STAFF in charged</b>		

**D.3. BOOKLETS FOR GROCERY AND OR AGRICULTURAL SUPPLIES OF SENIOR CITIZENS**

**ABOUT THE SERVICE:** *Booklets for Grocery & Agricultural Supplies is issued to a Senior Citizen in order to avail of the 5% discount on the basic & prime commodities pursuant to RA 9257 or the Expanded Senior Citizens Act of 2003*

STEP	APPLICANT/CLIENT	OFFICE ACTIVITY	DURATION	PERSON IN CHARGE	FEES	FORM
1.	Present OSCA I.D. & Passport Size pictures 4 pcs.	Copy Id # & Collect Pictures	2 mins.	<b>CRISTOPHER D. AQUINO GRACE F. MENDOZA ERAÑO G. CELI</b>		
2.	Accomplish Application Slip	Guide the Senior Citizen	5 mins.	-do-		
3.	Submit Application Slip	Process the Application Form	15 mins.	-do-		
4.	Claim Booklets (as scheduled)	Issue the appoved booklets	5 mins.	-do-		

**D.4. APPLICATION SOCIAL PENSION FOR INDIGENT SENIOR CITIZENS**

**ABOUT THE SERVICE:** *This is a financial assistance Pension in the amount of PHP 500.00 per month given to Senior Citizens aged 60 years and above who has no pension from private or government institutions, regular income, or support from their families.*

STEP	APPLICANT/CLIENT	OFFICE ACTIVITY	DURATION	PERSON IN CHARGE	FEES	FORM
1.	SC report to office bring: OSCA ID/ 2pcs 1x1 ID Picture/	Interview/Assesment	10 mins.	<b>CRISTOPHER D. AQUINO GRACE F. MENDOZA ERAÑO G. CELI</b>		

	Birth Certificate					
2.	SC fill up application form		15 mins.	-do-		
3.	Submit Application Form	Check data/ Application Form	10 minutes	-do-		
4.	Wait for approval/ Release of Pension	Submit application at Regiment Office	1-5 months	<b>CRISTOPHER D. AQUINO GRACE F. MENDOZA ERAÑO G. CELI</b>		

## **E. ISSUANCE OF IDENTIFICATION CARD TO SOLO PARENTS AND PERSONS WITH DISABILITIES**

*E.1. Identification Card is issued to a solo parent as per IRR of RA 8972 an Act Providing for the Benefits & Privileges to Solo Parents and their children.*

*E.2. Identification Card is issued to Persons with Disabilities as authorized by RA 9442 and its IRR.*

<b>STEP</b>	<b>APPLICANT/CLIENT</b>	<b>OFFICE ACTIVITY</b>	<b>DURATION</b>	<b>PERSON IN CHARGE</b>	<b>FEES</b>	<b>FORM</b>
1.	Proceed MSWDO Request for Application & inquire for the requirements	Issue Application form and inform the requirements	10 mins.	<b>LYNIE F. ABAR CRISTOPHER D. AQUINO GRACE F. MENDOZA ERAÑO G. CELI</b>		
2.	Submit accomplished application form & requirements	Process the Application Form	3 days	-do-		
3.	Claim ID Card	Release ID Cards	10 mins.	-do-		

## **F. PREPARATION OF REQUIREMENTS FOR:**

**F.1. ASSISTANCE TO INDIVIDUALS IN CRISIS SITUATION (AICS)**

**ABOUT THE SERVICE:** *Financial Assistance is provided for burial, medical, transportation, to clients in financial crisis situation.*

<b>STEP</b>	<b>APPLICANT/CLIENT</b>	<b>OFFICE ACTIVITY</b>	<b>DURATION</b>	<b>PERSON IN CHARGE</b>	<b>FEES</b>	<b>FORM</b>
1.	Client proceed to MSWD Office for inquiry	Interview & Assessment	1hr.	<b>LYNIE F. ABAR CRISTOPHER D. AQUINO GRACE F. MENDOZA ERAÑO G. CELI</b>		

2.	Client proceed to Mayor's Office for Financial request	Mayor to interview, listen and meet client for AICS approval	15 mins.	<b>HON. KIM MIKAEL G. AMADOR</b> or Representative		
3.	If approved, submit requirements as needed	Gather the requirements	15 mins.	<b>GRACE F. MENDOZA</b>		
4.		General Intake Sheet/ Certificate of Elegibility/ Certificate of Indigency and other requirements	5 working days	-do-		
5.	Claim Financial Assistance	Release Assistance	15 mins.	<b>GRACE F. MENDOZA</b> <b>PERLA E. MADURO – MTO</b>		

**F.2. PCSO REFERRALS, SOCIAL WELFARE INSTITUTIONS, COURT, ETC.**

**ABOUT THE SERVICE:** Social Case Study Report is provided to clients who wants to avail medical/financial assistance or for legal/court purposes and social welfare interventions/Determination of CICIL Discernment of Case.

<b>STEP</b>	<b>APPLICANT/CLIENT</b>	<b>OFFICE ACTIVITY</b>	<b>DURATION</b>	<b>PERSON IN CHARGE</b>	<b>FEES</b>	<b>FORM</b>
1.	Proceed to MSWD Office for inquiry/interview	- Assessment/give requirements - If requirements ready, interview client	10 mins. 40 mins.	<b>MYRNA A. DACANAY – MSWDO</b> or <b>LYNIE F. ABAR – SWO-I</b>		
2.	-	- Prepare Social Case Study Report - CICL – Interview / Home Visitation - Counseling / Examination of Disernment	3 days 10 days	<b>MYRNA A. DACANAY – MSWDO</b> or <b>LYNIE F. ABAR – SWO-I</b>		
5.	Claim OF SCSR	Release SCSR	10 mins.	<b>MYRNA A. DACANAY – MSWDO</b> or <b>LYNIE F. ABAR – SWO-I</b>		



## **G. PROVISION OF CERTIFICATE OF INDIGENCY OR REFERRAL**

### **G.1. CERTIFICATE OF INDIGENCY OR REFERRAL**

**ABOUT THE SERVICE:** *This is given upon request to needy clients who wanted to avail services of the*

*Public Attorney's Office (PAO) for Hospital/NGO referrals or Scholarship Purposes/  
Civil Registry/ POC(Point of Care).*

<b>STEP</b>	<b>APPLICANT/CLIENT</b>	<b>OFFICE ACTIVITY</b>	<b>DURATION</b>	<b>PERSON IN CHARGE</b>	<b>FEES</b>	<b>FORM</b>
1.	Proceed to MSWD Office for inquiry	- Assessment of client/submit requirements	10 mins.	LYNIE F. ABAR CRISTOPHER D. AQUINO GRACE F. MENDOZA ERAÑO G. CELI		
2.	Submit Requirements/ Barangay Certificate of Indigency. Prepare for interview	- interview client	30 mins.	-do-		
3.		Preparation of Cert. of Indigency/Referral Letters/Encoding/ Signing	1 hr.	MYRNA A. DACANAY LYNIE F. ABAR CRISTOPHER D. AQUINO GRACE F. MENDOZA ERAÑO G. CELI		
4.	Claim Cert. of Indigency or Referral Letter	Release Cert. of Indigency or referral	10 mins.	-do-		

## **H. PROVISION OF EMERGENCY SHELTER ASSISTANCE (ESA)**

**H.1. ABOUT THE SERVICE:** *This is provided to client's who are victims of natural or man-made disasters whose houses are either partially or totally damaged.*

<b>STEP</b>	<b>APPLICANT/CLIENT</b>	<b>OFFICE ACTIVITY</b>	<b>DURATION</b>	<b>PERSON IN CHARGE</b>	<b>FEES</b>	<b>FORM</b>
1.	Report incident to MSWDO & bring Police/BFP/Barangay Report/Pictures	- Interview & Assessment of client	1 hour	MYRNA A. DACANAY LYNIE F. ABAR GRACE F. MENDOZA		
2.		Preparation of Project Proposal for financial assistance/	3-5 days	-do-		

		and other requirements. Process the claims				
3.	Proceed to Treasurer's Office to claim assistance	Treasurer/MSWDO to release assistance	15 mins.	PERLA E. MADURO LYNIE F. ABAR GRACE F. MENDOZA		

## **I. PROVISION OF RELIEF GOODS AND FOOD FOR WORK.**

<b>STEP</b>	<b>APPLICANT/CLIENT</b>	<b>OFFICE ACTIVITY</b>	<b>DURATION</b>	<b>PERSON IN CHARGE</b>	<b>FEEES</b>	<b>FORM</b>
1.	Report to MSDWO Request Assistance	Interview client	15 mins.	MSWD STAFF		
2.	(If found eligible)	Provide Relief Goods	15 mins.	-do-		
3.	Barangay / Client apply for FFW	Prepare FFW Proposal	3 days	MYRNA A. DACANAY LYNIE ABAR CRISTOPHER D. AQUINO ERAÑO G. CELI		
4.	Identify FFW project	MSWDO/MAYOR	1 day	-do-		
5.	Implementation	Release FFW to clients	1-7 days	-do-		
6.		Evaluation & Monitoring of Project	1 week	MSWD / DSWD-FOI		

## **J. PROVISION OF CHILD DEVELOPMENT SERVICE PROGRAM AND SUPPLEMENTAL FEEDING**

**J.1. ABOUT THE SERVICE:** *This is provided to pre-schoolers in the 24 Day Care Centers of Manaoag in Preparation for their formal education and Provision of Supplementary Feeding to Improve their health and nutrition.*

<b>STEP</b>	<b>APPLICANT</b>	<b>OFFICE/ ACTIVITY</b>	<b>DURATION</b>	<b>PERSON IN CHARGE</b>	<b>FEEES</b>	<b>FORM</b>
1.	Enroll Childeren ages 3-4 DCC	Interview of Parents/ Filling of Application Forms	15 mins.	DAY CARE WORKERS (Upon enrolment only)		
2.	Report DCC- Monday to Friday	Conduct of Day Care Session	2 hrs.	DAY CARE WORKERS		
3.	Day Care Children in the DC Center	Supplementary feeding of Hot meal to all Day care Children	30 mins.	DAY CARE WORKER Parents Volunteers		

## **K. PANTAWID PAMILYA-UPDATES**

*K.1. ABOUT THE SERVICE: Updating the Pantawid Pamilya database is an important component of program implementation. The primary purpose of the System on Update is to gather, validate, report and record the changes that have occurred on the status or condition of any member of the beneficiary household while they are under the program.*

<b>STEP</b>	<b>APPLICANT/CLIENT</b>	<b>OFFICE ACTIVITY</b>	<b>DURATION</b>	<b>PERSON IN CHARGE</b>	<b>FEES</b>	<b>FORM</b>
1.	Proceed to MSWD. Sign the Walk-in Client Log-book Secure Certificates/ forms or attachments needed for the specific type of Update.	The staff will provide the needed certificate and instruct the client what to do	5 mins.	<b>MARY GRACE V. BAUTISTA – ML</b> <b>JACQUILYN L. LOPEZ – ML</b> <b>JON CARLO C. YALONG – ML</b> <b>RYAN ALYSSA D. DUCLAYAN – SWA</b>		
2.	The client will fill-up the necessary information needed in the certificate and secure other necessary attachments		5 mins.	-do-		
3.	The Client will secure the signatory of the following certificate. (Birth Cert., marriage contract, Brgy. Certificate and etc.)			-do-		
4.	Receive the Certificate	The staff will fill-up the UPDATE FORM (FORM 5) And supply the needed information	3 mins.	<b>MARY GRACE V. BAUTISTA – ML</b> <b>JACQUILYN L. LOPEZ – ML</b> <b>JON CARLO C. YALONG – ML</b> <b>RYAN ALYSSA D. DUCLAYAN – SWA</b>		

## **L. PANTAWID PAMILYA-GRIEVANCES**

*L.1. ABOUT THE SERVICE: It is a mechanism, or set of procedures and processes, to be used as a means to address and resolve issues and complaints related to project implementation.*

<b>STEP</b>	<b>APPLICANT/CLIENT</b>	<b>OFFICE ACTIVITY</b>	<b>DURATION</b>	<b>PERSON IN CHARGE</b>	<b>FEES</b>	<b>FORM</b>
1.	Proceed to MSWD. Sign the Walk-in Client Log-book	The staff will assist the client on filling up the Logbook	5 mins.	<b>MARY GRACE V. BAUTISTA – ML</b> <b>JACQUILYN L. LOPEZ – ML</b>		

				<b>JON CARLO C. YALONG – ML</b> <b>RYAN ALYSSA D. DUCLAYAN – SWA</b>		
2. Gathering of information about the grievance	The client will provide the necessary information about the grievance/query.	The staff will record the grievance/ query at the grievance logbook	<i>10 mins.</i>	<b>MARY GRACE V. BAUTISTA – ML</b> <b>JACQUILYN L. LOPEZ – ML</b> <b>JON CARLO C. YALONG – ML</b> <b>RYAN ALYSSA D. DUCLAYAN – SWA</b> <b>PDO</b>		
3. Resolution	Client will listen on information, regarding complaints/issues raised	The staff will conduct investigation regarding to the grievance received. If resolved: Case is closed and recorded in the logbook as resolved	<i>If the case is resolved</i> <i>10 mins</i>	<b>MARY GRACE V. BAUTISTA – ML</b> <b>JACQUILYN L. LOPEZ – ML</b> <b>JON CARLO C. YALONG – ML</b> <b>RYAN ALYSSA D. DUCLAYAN – SWA</b> <b>PDO</b>		
4.	If not resolved: the client will leave his contact information to feedback him/her about the grievance	If not resolved: the case will be forwarded to higher office for further resolution of the problem	<i>If not resolved</i> <i>5-10 days</i> <i>(Conduct of Home Visitation and Endorsement of Case to Provincial)</i>	<i>-do-</i>		

## **M. CASH CARD REPLACEMENT**

*M.1. ABOUT THE SERVICE: This is intended to resolved cases such as wrong name at the card, lost cash and damaged cash card.*

<b>STEP</b>	<b>APPLICANT</b>	<b>OFFICE ACTIVITY</b>	<b>DURATION</b>	<b>PERSON IN CHARGE</b>	<b>FEES</b>	<b>FORM</b>
1.	Proceed to MSWD. Sign the Walk-in Client Log-book	The staff will assist the client on filling up the Logbook	<i>5 mins.</i>	<b>MARY GRACE V. BAUTISTA – ML</b> <b>JACQUILYN L. LOPEZ – ML</b> <b>JON CARLO C. YALONG – ML</b> <b>RYAN ALYSSA D.</b>		

				<b>DUCLAYAN – SWA</b>		
2.	The client will provide the necessary information about the grievance/query .	The staff will instruct the client to secure Affidavit of loss(if cash card is loss) The staff will double check the filled-up form. The staff will collect 100.00 pesos for card replacement	5 mins.  5 mins. (issuance of OR)	<b>MARY GRACE V. BAUTISTA – ML</b> <b>JACQUILYN L. LOPEZ – ML</b> <b>JON CARLO C. YALONG – ML</b> <b>RYAN ALYSSA D. DUCLAYAN – SWA</b>		
3.	The client will leave their contact information for feed backing purposes.	The staff will forward the accomplished form at the Provincial Operations Office.	1 day	<b>MARY GRACE V. BAUTISTA – ML</b> <b>JACQUILYN L. LOPEZ – ML</b> <b>JON CARLO C. YALONG – ML</b> <b>RYAN ALYSSA D. DUCLAYAN – SWA</b>		
4.	The client will wait for the cash card processing	Continuously follow-up the cash card	3-6 months	<b>MARY GRACE V. BAUTISTA – ML</b> <b>JACQUILYN L. LOPEZ – ML</b> <b>JON CARLO C. YALONG – ML</b> <b>RYAN ALYSSA D. DUCLAYAN – SWA</b>		

## **N. SUSTAINABLE LIVELIHOOD PROGRAM**

**N.1. ABOUT THE SERVICE:** *The SLP is a capacity building program for poor, vulnerable, marginalized families and individuals in acquiring necessary assets to engage in and maintain livelihood that help improve their socio economic conditions.*

<b>STEP</b>	<b>APPLICANT</b>	<b>OFFICE ACTIVITY</b>	<b>DURATION</b>	<b>PERSON IN CHARGE</b>	<b>FEES</b>	<b>FORM</b>
1.	Proceed to MSWD office look for PDO/ML's	Interview/Skills Profiling/Household questionnaire	30 mins.	<b>NELSON CATALAN – PDO</b> <b>PHOEBI LOUISE ECO – PDO</b> <b>ML's</b>		
2.	Attend SLP Meeting applicants in the Barangay	SLP Group Formation Group Meeting and Brgy. Assembly	1-3 days	-do-		
3.	Prepare Mungkahing	Assist clients in the preparation of MP	1 day	-do-		

	Proyekto (MP).					
4.	Attend Training/Seminar on Basic Employment Skills or Micro Enterprise Development(ME DT)	Facilitate Training and ensure attendance of clients	<i>1-21 days</i>	<b>PDO (2) LGU MSWDO</b>		
5.	Preparation of counterpart and other logistics for the project identified	Checking/Monitor the counterpart of client	<i>1-7 days</i>	<b>PDO (2) LGU MSWDO</b>		
6.	Receive the Starter Kit assistance	Award the starter kit to the client	<i>1-2 days</i>	<b>PDO MSWDO</b>		
7.	Implementation of the identified project	Monitoring/Reporting	<i>6 mos.</i>	<b>PDO MSWDO</b>		
8.	Rollback Payment continuous implementation of the project	Monitor the sustainability of the project	<i>up to 2 years</i>	<b>PDO/Monitoring PDO/MSWDO</b>		

## **TYPE OF UPDATE AND ATTACHMENTS**

### **UPDATE NUMBER 1 - NEW BORN**

FIRST, check if the mother of child to the updated is tagged as "PREGNANT or DELIVERED" on the CVF1. IF NOT, DO NOT PROCESS THE UPDATE.

Otherwise, the ATTACHMENTS are the FF:

- **BIRTH CERTIFICATE OF THE CHILD** (check if the mother of the child on the birth certificate matches the name of the member tagged as pregnant on the system), IF NOT, DO NOT PROCESS THE UPDATE
- **HEALTH CERTIFICATE** to where the child is having his/her checkup etc,
- **SCHOOL CERTIFICATE** if the child is already attending school

### **UPDATE NUMBER 2 - CHANGE ADDRESS**

- **MUNICIPAL/CITY LINK CERTIFICATE** that will conform that the household was a former resident of the said municipality/city and a member of PPPP in the area; also state that the household had already transferred their address(indicate the new address)
- **BARANGAY CERTIFICATE** from the OLD ADDRESS stating that the household was a former resident of the said municipality/city
- **BARANGAY CERTIFICATE** from the NEW ADDRESS
- **PHOTOCOPY OF THE PPPP ID**
- **CONTACT NUMBER OF THE BENEFICIARY IF NECESSARY**

### **UPDATE NUMBER 4 - UPDATE ON HEALTH**

- **HEALTH CERTIFICATE** DULY SIGNED BY THE MIDWIFE

### **UPDATE NUMBER 5 - UPDATE ON SCHOOL**

- **SCHOOL CERTIFICATE** duly signed by the principal

### **UPDATE NUMBER 6 - CHANGE GRANTEE**

#### **FOR 18 YEARS OLD AND UP ---**

- BIRTH/ MARRIAGE CERTIFICATE OF THE NEW GRANTEE  
OLD IF(if available)

ID REQUEST FORM OF HTE NEW GRANTEE

- ML Certificate with signature for long absence
- Medical Certificate for poor health condition
- Death Certificate for death

**FOR 7 YEARS OLD TO 17 YEARS OLD –**

- **BIRTH CERTIFICATE OF THE NEW GRANTEE**
- **CASE STUDY**
- **ID REQUEST FORM FOR THE CHILD**
- **KASUNDUAN FOR THE CHILD**
- **OLD ID (IF AVAILABLE)**
  - ML Certificate with signature for long absence
  - Medical certificate for the poor health condition
  - Death Certificate for death

**FOR 0 YEAR OLD TO 6 YEARS AND 11 MONTHS OLD ---**

- **BIRTH CERTIFICATE OF THE NEW GRANTEE**
- **BIRTH CERTIFICATE OF THE GUARDIAN**
- **LETTER OF WILLINGNESS FROM THE GUARDIAN**
- **CASE STUDY**
- **ID REQUEST FORM FOR THE GUARDIAN**
- **KASUNDUAN FOR THE GUARDIAN**
- **OLD ID**
  - ML Certificate with signature for long absence
  - Medical certificate for the poor health condition
  - Death Certificate for death

**UPDATE NUMBER 7 - DECEASED**

- **DEATH CERTIFICATE**

**UPDATE NUMBER 8 - CHILD COMING BACK HOME**

- **BIRTH CERTIFICATE OF THE CHILD** (*check if the mother of the child listed on the certificate is a member or listed on the family roster*), IF NOT, DO NOT PROCESS THE UPDATE

**UPDATE NUMBER 9 - CORRECTION OF BASIC INFORMATION**

- **Birth Certificate of the concerned client**

**UPDATE NUMBER 11 - REPLACEMENT OF CHILDREN CVS EDUCATION**

- **Birth Certificate of the child**
- **School Certificate**
- **Health Certificate**



