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|---|---|------------------|------------------------|
|  | Commission on Filipinos Overseas  | Document Code    | CFO-PPR-FR-PRA-001 F02 |
|   |   | Page No.         | Page 1 of 3            |
|   | Presidential Awards for Filipino Individuals and Organization Overseas<br><b>NOMINATION FORM FOR ORGANIZATION</b> | Revision No.     | 01                     |
|   |   | Effectivity Date | 13-Dec-2017            |

**INSTRUCTIONS: Please type or print and use additional sheets as necessary. Do not leave any entries blank (use N/A if not applicable). Misrepresentation or falsification of information stated in the nomination form or in any of the supporting documents submitted will result in automatic disqualification.**

|  |  |  |              |  |  |
|--|--|--|--------------|--|--|
| <b>Initial Nomination Category</b><br><input type="checkbox"/> Banaag<br><input type="checkbox"/> Kaanib ng Bayan<br><input type="checkbox"/> Lingkod sa Kapwa Pilipino  |  | <b>Final Nomination Category (to be completed by CFO)</b><br><input type="checkbox"/> Banaag<br><input type="checkbox"/> Kaanib ng Bayan<br><input type="checkbox"/> Lingkod sa Kapwa Pilipino |              |  |  |
| <b>Attachments / Documents</b><br><input type="checkbox"/> Organization Logo and 12.75 cm x 17.5 cm group photograph<br><input type="checkbox"/> Constitution and By-laws<br><input type="checkbox"/> Summary of Accomplishments and Contributions |  |  |              | <input type="checkbox"/> Certificates of Merit / Citations<br><input type="checkbox"/> Testimonials / Other References<br><input type="checkbox"/> Other Information/Photos<br><input type="checkbox"/> Endorsement Form |  |
| <b>I. INFORMATION ABOUT THE NOMINEE</b><br><i>Please attach organization logo and 12.75 cm x 17.5 cm group photograph.</i>   |  |  |              |  |  |
| Name of Organization:  |  |  |              |  |  |
| Office Address:  |  |  |              |  |  |
| _____  |  | _____  |              | _____  |  |
| Street   |  | City/Town/County   |              | Country  |  |
| Tel. No.:  |  | Fax No.:   |              | E-mail:  |  |
| Head of Organization:  |  |  | Position:    |  |  |
| Contact Person:  |  |  |              |  |  |
| Address of Contact Person:   |  |  |              |  |  |
| _____  |  | _____  |              | _____  |  |
| Street   |  | City/Town/County   |              | Country  |  |
| Home Tel. No.:   |  |  | Office Tel.: |  |  |
| Mobile No.:  |  |  | E-mail:      |  |  |
| <b>II. PROFILE OF NOMINEE</b><br><i>Please attach copy of constitution and by-laws/basic agreement and use additional sheets as necessary.</i>   |  |  |              |  |  |
| Type of Organization:  |  |  |              |  |  |
| <input type="checkbox"/> Association   |  | <input type="checkbox"/> Cooperative   |              | <input type="checkbox"/> Partnership   |  |
|  |  |  |              | <input type="checkbox"/> Corporation   |  |
|  |  |  |              | <input type="checkbox"/> Federation  |  |
| When and Where Established:  |  |  |              |  |  |
| Mission/Objectives of the Organization:  |  |  |              |  |  |
| Officers of the Organization:  |  |  |              |  |  |



Commission on Filipinos Overseas

Presidential Awards for Filipino Individuals and Organization Overseas  
**NOMINATION FORM FOR ORGANIZATION**

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**III. SUMMARY OF ACCOMPLISHMENTS OR CONTRIBUTIONS OF THE NOMINEE**

*Please arrange chronologically (starting with the latest) and enclose copies of certifications, annual reports and other supporting documents. Use additional sheets as necessary.*

**IV. AWARDS / CITATIONS / HONORS**

*Please arrange chronologically (starting with the latest) and enclose copies of certifications or supporting documents. Use additional sheets as necessary.*

| Awards / Honors / Citations | Conferred by | When Conferred |
|-----------------------------|--------------|----------------|
|                             |              |                |
|                             |              |                |
|                             |              |                |
|                             |              |                |

**V. TESTIMONIALS**

*Please list and submit testimonials from at least three (3) competent persons or beneficiaries. Additional references may be included. Use additional sheets as necessary.*

| Witness or Beneficiary | Profession / Designation | Address | Tel/Fax No./ Email |
|------------------------|--------------------------|---------|--------------------|
|                        |                          |         |                    |
|                        |                          |         |                    |
|                        |                          |         |                    |

**VI. OTHER INFORMATION**

*Please include information other than those mentioned above which may support the nomination such as research papers, publication, news or feature articles or additional photographs. Use additional sheets as necessary.*

**VII. NOMINATING PARTY**

Name: Mr./Ms. \_\_\_\_\_  
Surname First Name Middle Name

Address: \_\_\_\_\_  
Street Town/City / County Country



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|  |              |
|--|--------------|
| Home Tel. No.:                             | Office Tel.: |
| Mobile No.:                                | E-mail:      |
| Signature:                                 |              |
| <b>VIII. ENDORSING PARTY</b>               |              |
| Philippine Embassy/Consulate:              |              |
| Name and Designation of Authorized Person: |              |