



# DATA SHARING with OBSUs—Statistics/Raw Data Request

## I. OFFICE OR DIVISION

POLICY AND PLANS DIVISION – NATIONAL HOUSEHOLD TARGETING SECTION

# II. SCHEDULE OF AVAILABILITY OF SERVICE

MONDAY- FRIDAY (8:00 AM-5:00 PM)

## III. WHO MAY AVAIL OF THE SERVICE

DSWD Offices/Bureaus/Services/Units

WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE
One (1) original or copy of letter of request (specify purpose and data requested)	Provided by requesting party

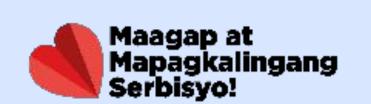
## IV. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. The Requesting party will endorse their letter of request for statistical data/ raw data generated from Listahanan (specify the purpose and data requested).	None	30 Minutes	Kimberly G. Masalta Administrative Assistant III
2. Receive the data requested then fill up the Client Satisfaction Measurement Survey.	None	30 Minutes	Kimberly G. Masalta Administrative Assistant III

## V. PROCESSING TIME

Total Processing Time: 3 days

















# DATA SHARING with OBSUs—List of Data Subjects

## I. OFFICE OR DIVISION

POLICY AND PLANS DIVISION – NATIONAL HOUSEHOLD TARGETING SECTION

## II. SCHEDULE OF AVAILABILITY OF SERVICE

MONDAY- FRIDAY (8:00 AM-5:00 PM)

## III. WHO MAY AVAIL OF THE SERVICE

1. All DSWD Offices, Bureaus, Services, Units (OBSUs)

WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE
<ul> <li>With existing and valid Non-Disclosure Agreement (NDA): <ol> <li>One (1) original/copy of letter of request (indicating purpose for the request, the list of data sets required and how these will be used, and a reasonable timeline as to when the requested data is needed</li> <li>No existing and valid Non-Disclosure Agreement (NDA):</li> <li>One (1) original/certified true copy of document indicating the appointed and NPC-registered Data Protection Officer</li> <li>One (1) original copy of accomplished Non-Disclosure Agreement (NDA)</li> <li>One (1) copy of List of personnel who will have access to the Listahanan data together with the purpose and data processing they will employ in the treatment of data</li> </ol> </li> </ul>	Provided by requesting party

### IV. HOW TO AVAIL OF THE SERVICE

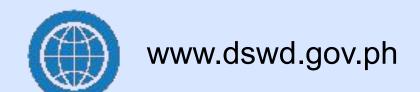
CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. The Requesting party will endorse the letter of request with attached e-copy of data requirements to NHTS.	None	15 Minutes	Kimberly G. Masalta Administrative Assistant III
2. Submission of signed Non-Disclosure Agreement (NDA) Agreement and other documentary requirements not included in the submission of letter of request to the NHTO/ NHTS for review on completeness	None	2 Hours	Kimberly G. Masalta Administrative Assistant III
3. Received the result and call the NHTS Office for the password. Then fill-up the Client Satisfaction Measurement Survey.	None	10 Minutes	Kimberly G. Masalta Administrative Assistant III

#### V. PROCESSING TIME

**Total Processing Time:** 5 days, 1 hour and 35 minutes \*with possible extension















# DATA SHARING with OBSUs—Name Matching

## I. OFFICE OR DIVISION

POLICY AND PLANS DIVISION – NATIONAL HOUSEHOLD TARGETING SECTION

## II. SCHEDULE OF AVAILABILITY OF SERVICE

MONDAY- FRIDAY (8:00 AM-5:00 PM)

## III. WHO MAY AVAIL OF THE SERVICE

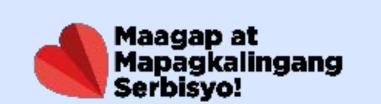
All DSWD Offices, Bureaus, Services, Units (OBSUs)

WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE
<ul> <li>With existing and valid Non-Disclosure Agreement (NDA):</li> <li>1.One (1) original/copy of letter of request (Indicate reason for name matching)</li> <li>2.One (1) electronic copy (Preferably in CSV format) of the name to be matched which includes the following:</li> <li>Complete name (Last name, First Name, Middle Name, Extension Name)</li> <li>Birth Date (YYYY-MM-DD format)</li> <li>Philippine Standard Geographic</li> </ul>	WHERE TO SECURE
Classification of (PSGC) Province, City/Municipality, and Barangay  • No existing and valid Non-Disclosure Agreement (NDA):	Provided by requesting party
3.One (1) original Non-Disclosure Agreement (NDA) signed by the: (1) Head of Office as Personal Information Controller (PIC), (2) designated Data Privacy Officer (DPO) or Compliance Officer (COP) 4.One (1) copy of List of Personnel who will access, process, and safeguard the Listahanan data, including the employed data processing	

### IV. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. The Requesting party will endorse their letter of request with attached e-copy of names for name matching to NHTS.	None	15 Minutes	Kimberly G. Masalta Administrative Assistant III
2. Provide the documentary requirements and the NDA signed by the Head of Office (HOO) as Personal Information Controller (PIC) and the designated Data Privacy Officer (DPO) / Compliance Officer for Privacy (COP).	None	2 Hours	Donald Rey L. Dejacto IT Officer II

















CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
3. Provide a storage device that is approved by the IT Chief or request for a Google Drive link	None	3 Hours	Kimberly G. Masalta Administrative Assistant III
4 Receive the results of name matching.	None	10 Minutes	Donald Rey L. Dejacto IT Officer II
5. Fill-out the Client Satisfactory Measurement Survey (CSMS)	None	10 Minutes	Kimberly G. Masalta Administrative Assistant III

## V. PROCESSING TIME

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Total	Proce	essing	Time:

For 5000 names and below:

2 days, 3 hrs and 35 mins

For 5,001 - 50,000 names:

4 days, 3 hrs and 35 mins

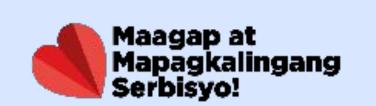
For 50,000 - 400,000 names:

8 days, 3 hrs and 35 mins

For 400,001 - 1,000,000 names:

21 days, 3hrs and 35 mins

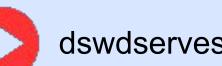
















# Walk-in Name Matching Data Request

## I. OFFICE OR DIVISION

POLICY AND PLANS DIVISION – NATIONAL HOUSEHOLD TARGETING SECTION

# II. SCHEDULE OF AVAILABILITY OF SERVICE

MONDAY- FRIDAY (8:00 AM-5:00 PM)

## III. WHO MAY AVAIL OF THE SERVICE

## 1. All walk-in clients

WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE
1.One (1) Valid Identification Card / Proof of Identity	Provided by the Requesting Party
2.One (1) original copy of Walk-in Name Matching Form	PPD - NHTS Grievance Officer

## IV. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill-up the Walk-in Name matching form and provide valid identification card/ proof of identity		30 Minutes	Ma. Ellainne R. B ugotng Project Development Officer I
2. Receive the Name Matching result	None	5 Minutes	Ma. Ellainne R. B ugotng Project Development Officer I
3. Answer the Client Satisfaction Measurement Survey	None	5 Minutes	Ma. Ellainne R. B ugotng Project Development Officer I

## V. PROCESSING TIME

Total Processing Time: 40 minutes.

















# Data Sharing - Name Matching

## I. OFFICE OR DIVISION

POLICY AND PLANS DIVISION – NATIONAL HOUSEHOLD TARGETING SECTION

## II. SCHEDULE OF AVAILABILITY OF SERVICE

MONDAY- FRIDAY (8:00 AM-5:00 PM)

#### III. WHO MAY AVAIL OF THE SERVICE

 All NGAs, GOCCs, NGOs, CSOs, and private foundations for the purpose of utilizing the data for social protection programs

#### WHAT ARE THE REQUIREMENTS?

- 1. One (1) original or copy of letter of request (Indicate reason for name matching)
- 2. One (1) electronic copy (Preferably in CSV format) of the name to be matched which includes the following:
- Complete name (Last name, First Name, Middle Name, Extension Name)
- Birth Date (YYYY-MM-DD format)
- Philippine Standard Geographic Classification of (PSGC) Province, City/Municipality, and Barangay
- 3. One (1) original Valid Proof of Identities of the Personal Information Controller (PIC), Data Protection Officer (DPO), Compliance Officer (COP)
- 4. One (1) original copy of Data Sharing Agreement (DSA) signed by the: (1) Head of Office as PIC, (2) designated DPO or COP
- 5. One (1) original/photocopy of List of Personnel who will access, process, and safeguard the Listahanan data, including the employed data processing
- 6. One (1) original Copy of the Resolution of Governing Board authorizing head of agency (NGOs, CSOs, and Private Foundations)

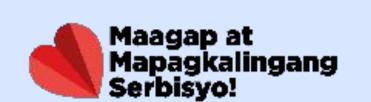
#### \*For Local Government Unit (LGU):

- The letter of request shall be signed by the Local Chief Executive (LCE) accompanied by a Sanggunian resolution authorizing the LCE to enter a data sharing agreement with the DSWD
- The DSWD Regional Director (RD) and the incumbent LCE shall sign the DSA

#### WHERE TO SECURE

Provided by requesting party

















# IV. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. The Requesting party will endorse their letter of request with attached e-copy of names for name matching to NHTS.	None	15 Minutes	Kimberly G. Masalta Administrative Assistant III
2.Provide the documentary requirements and the DSA signed by the Head of Office (HOO) as Personal Information Controller (PIC) and the designated Data Privacy Officer (DPO) / Compliance Officer for Privacy (COP)	None	2 Hours	Kimberly G. Masalta Administrative Assistant III
3. Provide a storage device that is approved by the IT Chief or request for a Google Drive link	None	3 Hours	Kimberly G. Masalta Administrative Assistant III
4. Receive the documents	None	10 Minutes	Kimberly G. Masalta Administrative Assistant III
5. Fill out the Client Satisfactory Measurement Survey (CSMS)	None	10 Minutes	Donald Rey L. Dejacto IT Officer II

## V. PROCESSING TIME

Total Processing Time: For 5000 names and below:

2 days, 3 hrs and 45 mins

For 5,001 - 50,000 names: 4 days, 3 hrs and 45 mins

For 50,000 - 400,000 names:

8 days, 3 hrs and 45 mins

For 400,001 - 1,000,000 names:

21 days, 3hrs and 45 mins

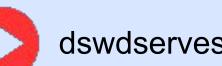
















# Data Sharing – List of Data Subjects

# I. OFFICE OR DIVISION

NATIONAL HOUSEHOLD TARGETING OFFICE (NHTO) and NATIOANL HOUSEHOLD TARGETING SECTIONS (NHTS)

## II. SCHEDULE OF AVAILABILITY OF SERVICE

MONDAY- FRIDAY (8:00 AM-5:00 PM)

## III. WHO MAY AVAIL OF THE SERVICE

 All NGAs, LGUs, GOCCs, NGOs, CSOs, the Academe and private Foundations for the purpose of utilizing the data for social protection programs

WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE
<ol> <li>One (1) original or copy of Letter of Request (indicating reasons for the request and specific data sets expected to be acquired from the Listahanan database).</li> <li>One (1) original copy of accomplished Data Sharing Agreement (DSA).</li> <li>One (1) original/certified true copy of document indicating the appointed and NPC – registered Data Protection Officer (DPO).</li> <li>One (1) original/copy of Privacy Manual or approved document/s on the security measures in place which indicates the data protection procedures and processes of the office/agency in addressing breaches.</li> <li>One (1) original/copy of list of identified staff who will access, process, and safeguard the Listahanan data including the data processing to be employed.</li> <li>Hardware and Security Component with supporting images and specifications.</li> <li>One (1) original/copy of Documentation of physical security measures in place.</li> <li>One (1) original copy of the Resolution of Governing Board authorizing head of agency to enter into a data sharing agreement with DSWD (only for NGOs, CSOs, and Private Foundations)</li> <li>One (1) original/copy of Valid Proof of Identities of the agency head and their designated DPO/s )only for NGOs, CSOs, and Private Foundations)</li> <li>One (1) original/certified true copy of Valid documents indicating the legitimacy of the organization (only for NGOs, CSOs, and Private Foundations)</li> <li>The letter of request shall be signed by the Local Chief Executive (LCE) accompanied by a Sanggunian resolution authorizing the LCE to enter a data sharing agreement with the DSWD</li> <li>The DSWD Regional Director (RD) and the incumbent LCE shall sign the DSA.</li> </ol>	Provided by requesting party















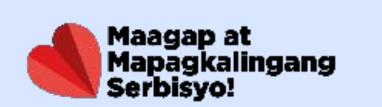
# IV. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. The Requesting party will endorse their letter of request with attached e-copy of data requirements to NHTS.	None	15 Minutes	Kimberly G. Masalta Administrative Assistant III
2. Attend the scheduled orientation with the NHTO ACBS and Inspection Team/ NHTS designated personnel & Inspection Team.	None	2 hours	Lester R. Laborte PDO IV
3. Submit the signed Data Sharing Agreement (DSA) and other documentary requirements not included in the submission of letter request.	None	2 hours	Lester R. Laborte PDO IV
4. Requesting party will present their IT facilities to the NHTS Inspection Team.	None	1 day	Donald Rey L. Dejacto IT Officer II  Lester R. Laborte PDO IV
5. Received the result and call the NHTS Office for the password. Then fill-up the Client Satisfaction Measurement Survey.	None	10 minutes	Donald Rey L. Dejacto IT Officer II

## V. PROCESSING TIME

Total Processing Time: 10 days, 1 hour, and 35 minutes

















# Data Sharing – Statistics/Raw Data Request

## I. OFFICE OR DIVISION

POLICY AND PLANS DIVISION - NATIONAL HOUSEHOLD TARGETING SECTION

## II. SCHEDULE OF AVAILABILITY OF SERVICE

MONDAY- FRIDAY (8:00 AM-5:00 PM)

#### III. WHO MAY AVAIL OF THE SERVICE

1. All NGAs, GOCCs, NGOs, CSOs, private foundations for the purpose of utilizing the data for social protection programs and private individuals for research purposes.

WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE
1.One (1) original/copy of Letter of Request (specify purpose and data requested)	Provided by requesting party

## IV. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. The Requesting party will endorse their letter of request of statistical data/ raw data generated from Listahanan (specify purpose and data requested).	None	30 Minutes	Kimberly G. Masalta Administrative Assistant III
2. Receive the data requested then fill-up the Client Satisfaction Measurement Survey.	None	30 Minutes	Kimberly G. Masalta Administrative Assistant III

## V. PROCESSING TIME

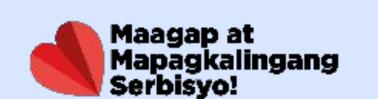
Total Processing Time: 3 days

## VI. FEEDBACKS AND COMPLAINTS MECHANISM

Contact Information of CCB, PCC, ARTA	ARTA:		
	8-478-5093		
	complaints@arta.gov.ph		
	PCC:		
	pcc@malacanang.gov.ph		
	8888		
	CCB:		
	email@contactcenterngbayan.gov.ph		
	09088816565 (SMS), hotline 1-6565		
Contact Information	Contact Person: Lester R. Laborte/ PDO IV		
	Contact Number: Tel No. 232-9505;		
	233-8785; Local - 17118		
	Email Address: nhtu.fo7@dswd.gov.ph		
	Office Address: MJ Cuenco Corner, General		
	Maxilom Avenue, Cebu City		

**#DSWDMayMalasakit** 







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