



I. OFFICE OR DIVISION

SOCIAL WELFARE AND DEVELOPMENT (SWAD) SIQUIJOR

II. SERVICE CLASSIFICATION

SIMPLE

III. SCHEDULE OF AVAILABILITY OF SERVICE

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

IV. WHO MAY AVAIL OF THE SERVICE

Indigent, marginalized, and vulnerable/disadvantaged individuals and families or are otherwise in crisis situation based on the assessment of the Social Worker

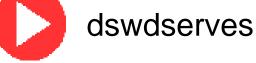
WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE
1. Any Valid identification card of the client/person to be interviewed (1 original copy) from the following:	
●PhilSys ID	Philippine Statistics Authority
•UMID ID, SSS or GSIS ID	Social Security System or Government Service Insurance System
Philhealth ID	Philhealth
Driver's License	Land Transportation Office
•PRC ID	Professional Regulation Commission
•OWWA ID	Overseas Workers Welfare Administration
• DOLE ID	Department of Labor and Employment
• PAG-IBIG ID	Pag-IBIG Fund
 Voter's ID or Voter's Certification 	Commission on Election
Postal ID	Post Office
Philippine Passport	Department of Foreign Affairs
NBI Clearance	National Bureau of Investigation
•4Ps ID	Department of Social Welfare and Development
•PWD ID	Local Government Unit
Solo Parent ID	Local Government Unit
City or Municipal ID	Local Government Unit
Barangay ID	Local Government Unit
 Office of Senior Citizen Affairs (OSCA ID) 	Local Government Unit
Police Clearance	Police Station
or any ID preferably with validity date, and picture and signature of the client.	Barangay Hall
In extremely justifiable circumstances, a Barangay Certification certifying the identity of the client may be presented in lieu of an Identification Card.	Barangay Hall
Signed Authorization Letter (if applicable)	Beneficiary of Assistance except for those who do not have the capacity to act or below 18 years old















WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE	
TRANSPORTATION ASSISTANCE		
Other supporting document/s such as but are not		
limited to (1 original copy):		
Police Blotter	Police Station	
Medical Abstract	Hospitals or clinic	
Court Order or Subpoena	Supreme Court	
Death Certificate	Civil Registry Office	
MEDICAL ASSISTANCE FOR HOSPITAL BILL		
1. Medical Certificate or Clinical Abstract or Discharge Summary or Alagang Pinoy Tagubilin Form with Diagnosis with complete name, license		
number and signature of the Physician issued within three months (1 Original or Certified true copy)	Attending Physician	
2. Hospital bill or Statement of Account (outstanding balance) with name and signature of billing clerk or Certificate of balance and promissory note signed by credit and collection officer or billing clerk (1 Original or Certified True Copy)	Billing Office of the Hospital Credit and Collection Office of the Hospital	
3. Social Case Study Report or Case Summary.(1 original copy)	Registered Social Worker in public or private practice. DSWD LSWDO NGO Medical Social Service	
MEDICAL ASSISTANCE FOR MEDICINE/ ASSIS	STIVE DEVICE	
1.Medical Certificate or Clinical Abstract or Discharge Summary or Alagang Pinoy Tagubilin Form with Diagnosis with complete name, license number and signature of the Physician issued within three months (Original / Certified true copy)		
2.Prescription with date of issuance, complete name, license number and signature of the Physician issued within three months	Attending Physician from a hospital or clinic.	
If the amount of assistance being requested exceed as additional requirements	eds PhP10,000.00, the following shall be required	
1.Quotation of Laboratory	Service Provider	
2.Social Case Study Report or Case Summary.	Registered Social Worker in public or private practice. DSWD LSWDO NGO Medical Social Service	







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WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE		
MEDICAL ASSISTANCE FOR LABORATORY			
1.Medical Certificate or Clinical Abstract or Discharge Summary or Alagang Pinoy Tagubilin Form with Diagnosis with complete name, license Attending Physician or from Medical Records of number and signature of the Physician issued within three months (Original or Certified true copy)			
2.Laboratory Requests or Laboratory Protocol or Doctor's Order with name, license number, and signature of the Physician			
If the amount of assistance being requested exce as additional requirements	eds PhP10,000.00, the following shall be required		
1.Quotation of Laboratory	Service Provider		
2.Social Case Study Report or Case Summary.	Registered Social Worker in public or private practice. DSWD LSWDO NGO Medical Social Service		
FUNERAL ASSISTANCE FOR FUNER			
1.Death Certificate or Certification from the Tribal Chieftain (Original or certified true copy	Hospital, Funeral Parlor, Tribal Chieftain or Imam Authorized staff of the Funeral Parlor or Memorial		
2.Promissory Note or Certificate of Balance or Chapel Statement of account			
3.Funeral Contract	Authorized staff of the Funeral Parlor or Memorial Chapel		
FUNERAL ASSISTANCE FOR TRANS	FER OF CADAVER		
1.Death Certificate or Certification from the Tribal Chieftain (Original or certified true copy)	City or Municipal Hall (Civil Registry Office), hospital, funeral parlor, tribal chieftain or Imam.		
2.Transfer Permit	City or Municipal Hall		
EDUCATIONAL ASSISTANCE			
1.Validated School ID and Valid I. D	School where the beneficiary is enrolled		
2. (1 original/certified true copy of the following)a. Enrolment Assessment Form orb. Certificate of Enrolment or Registration; orc. Statement of Account	School Registrar or Concerned Office where the beneficiary is enrolled		
FOOD ASSISTANCE FOR INDIVIDUAL AND FAMILIES ENDORSED IN GROUPS			
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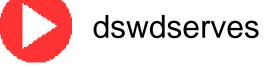
admitted





admitted









WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE		
CASH ASSISTANCE FOR OTHER SUI	PPORT SERVICES		
Depending on the circumstances: a. For Fire Victims: Police Report or Bureau of Fire Protection Report from the Bureau of Fire b. For Distressed OFs: Passport, Travel Document/s, certification from OWWA or the Barangay c. For Rescued Client: Certification from a social worker or Case manager from rescued clients. d. For victims of Online Sexual Exploitation: a. Police Blotter and social worker's certification for the	Bureau of Fire or PNP Overseas Workers Welfare Administration or Department of Migrant Workers or Barangay Local Social Welfare and Development Office or other social welfare agencies Local Social Welfare and Development Office or		
victims of online b. sexual exploitation of children e. For Locally stranded individuals (LSI): LSI without valid IDs, the Medical Certificate or the Travel Authority issued by the Philippine National Police will suffice and be accepted to prove his or her identity.	Hospital or Clinic		
For all other incidents: Barangay Certificate of Residency or Certificate of Indigency or Certificate of the Client is in Need of Assistance as well as other documents from legal authorities or regulating agencies, as may be applicable such as but not limited to Police Report or Blotter, Spot report from the AFP or PNP, Joint AFP-PNP Intelligence Committee (JAPIC) certificate, Certification of death, Disaster Assistance Family Access Card (DAFAC); Medico-legal certification	 Police Station AFP or PNP Office of Civil Registry Certificate from the LDRMO; or Local Government Unit 		
MATERIAL ASSISTANCE			
1.General Intake Sheet	SWAD		
2.Material Assistance Distribution Sheet	SWAD		



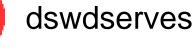






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CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Present pertinent documents.	None	1 hour	Divine Grace R. Lecias Social Welfare Officer II
2. Submit pertinent documents for interview and assessment	None	3 hours	Divine Grace R. Lecias Social Welfare Officer II
3. Receiving Assistance	None	50 minutes	Divine Grace R. Lecias Social Welfare Officer II
4. Fill out Client Satisfaction Measurement Survey	None	1 hour	Divine Grace R. Lecias Social Welfare Officer II













VI. PROCESSING TIME

5 Hours, 40 minutes for Cash-Outright 16 Working Hours (2 days) for GL

VII. FEEDBACKS AND COMPLAINTS MECHANISM

How to send feedback	The client or referring party could express their feedback through the Client Satisfaction Measurement Form that would be given at the end of the client's transaction in the Crisis Intervention Unit/Section (CIU/S) or through https://t.ly/DPvRR which will be given after they were assessed by the social worker where or not they receive assistance.
How feedbacks are processed	The duly accomplished Satisfaction Survey Form shall be consolidated together with the generated online customer feedback form once a month, identifying issues and concerns of the clients, which shall be discussed for appropriate action. Status on the identified issues and concerns shall be monitored on a monthly basis.
How to file a complaint	CIU/CIS and SWAD Offices shall implement two mechanisms for handling grievances and complaints which are (1) Written Communication and Email which is handled by the Grievance Focal Person (GFP), and (2) Personal or Onsite Complaints thru the establishment of the Public Assistance Complaint Desk (PACD). A complaint may be filed through any of the established modalities: Personal appearance (walk-in clients) through the Public Assistance and Complaints Desk- electronic email where concerns can be send to ciu.fo7@dswd.gov.ph Letters addressed to the Regional Director, Ms. Shalaine Marie S. Lucero, DSWD Field Office VII or through our OIC-Division Chief of Protective Service Division, Ms. Emma F. Patalinghug or Ms. Clavel C. Saycon SWO-IV/ Section Head of Crisis Intervention Section Through 8888 Citizen's Complaint Center

How complaints are processed

Written Communication and Email

Step 1: Recording and Tagging of Grievances

Grievances forwarded to the CID/CIS shall be received by the assigned incoming document administrative staff of CID/S. The said officer shall log the document in the Electronic Document Tracking Management System (EDTMS) of the Department signifying that the document was received by the office. They will then forward it to the Grievance Focal Person. The DRN, Subject of the document, and other pertinent details shall be listed in the monitoring tool for action of the Grievance Focal Person.

Step 2: Action and Response

Upon receiving the document, the Grievance Focal Person shall assess and inform the concerned staff/s, team, or section on their involvement in the received grievance case. The concerned staff or team shall be given three (3) days to respond to the complaint through a feedback letter. The said document shall be sent to the concerned parties copy furnished to the PSD-Chief

Step 3: Monitoring

A designated Grievance Focal Person per CID/CIS and SWAD offices shall be responsible for responding to and monitoring grievances concerning their respective office. All grievances will be recorded and monitored through a centralized system to ensure all grievances are provided with appropriate action in compliance with RA. 11032.

Step 4: Termination

Grievances provided with an action shall be marked as resolved if no further follow-through from the complainant is received after three (3) days from the date the feedback letter was sent.













Personal or onsite complaints

A PACD shall be stationed within the CIU/CIS/SWAD Satellite Office operating area where it will be visible and accessible to clients. The management of the said offices shall designate a personnel to man the said desk to immediately respond to complaints of clients onsite. Below is the process of handling received cases.

Step 1: Recording of PACD Concern

The PACD Officer shall be in charge of addressing the concerns raised through the PACD and shall account all transactions through a PACD Monitoring Tool which will contain the basic information and contact details of the client, and their concern.

Step 2: Assessment and Intervention

The PACD Officer shall be responsible to assess the concern of the client and shall intervene based on the presented concern. They shall observe maximum tolerance and calmly handle clients expressing their concerns or plea, whatever the case may be. For brevity, the PACD Officer shall provide a brief description of the actions taken to resolve the concern of the client on the PACD Monitoring Tool.

In cases that the client persisted to be unresolved with the intervention despite the diligent effort of the PACD Officer to assist them with their case, the PACD Officer shall be required to prepare an incident report and escalate the concern with the management.

Contact Information of ARTA, PCC and CCB

Anti-Red Tape Authority (ARTA)

complaints@arta.gov.ph 8-478-5093

Presidential Complaint Center (PCC)

pcc@malacanang.gov.ph 8888

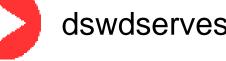
Contact Center ng Bayan (CCB) email@contactcenterngbayan.gov.ph 0908-881-6565















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III. SCHEDULE OF AVAILABILITY OF SERVICE

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

III. WHO MAY AVAIL OF THE SERVICE

Indigent, marginalized, and vulnerable/disadvantaged individuals and families or are otherwise in crisis situation based on the assessment of the Social Worker

WHAT ARE THE REQUIREMENTS? 1. Any Valid identification card of the client/person to be interviewed (1 original copy) from the following:	
PhilSys ID	Philippine Statistics Authority
• UMID ID, SSS or GSIS ID	Social Security System or Government Service Insurance System
● Philhealth ID	Philhealth
Driver's License	Land Transportation Office
• PRC ID	Professional Regulation Commission
•OWWA ID	Overseas Workers Welfare Administration
• DOLE ID	Department of Labor and Employment
• PAG-IBIG ID	Pag-IBIG Fund
 Voter's ID or Voter's Certification 	Commission on Election
● Postal ID	Post Office
 Philippine Passport 	Department of Foreign Affairs
NBI Clearance	National Bureau of Investigation
•4Ps ID	Department of Social Welfare and Development
• PWD ID	Local Government Unit
Solo Parent ID	Local Government Unit
City or Municipal ID	Local Government Unit
Barangay ID	Local Government Unit
 Office of Senior Citizen Affairs (OSCA ID) 	Local Government Unit
Police Clearance	Police Station
 or any ID preferably with validity date, and picture and signature of the client. 	
In extremely justifiable circumstances, a Barangay Certification certifying the identity of the client may be presented in lieu of an Identification Card.	
Signed Authorization Letter (if applicable)	Beneficiary of Assistance except for those who do not have the capacity to act or below 18 years old













WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE	
TRANSPORTATION ASSISTANCE		
Other supporting document/s such as but are not limited to (1 original copy):		
Police Blotter	Police Station	
Medical Abstract	Hospitals or clinic	
Court Order or Subpoena	Supreme Court	
Death Certificate	Civil Registry Office	
MEDICAL ASSISTANCE FOR HOSPITAL BILL		
1. Medical Certificate or Clinical Abstract or Discharge Summary or Alagang Pinoy Tagubilin Form with Diagnosis with complete name, license number and signature of the Physician issued within three months (1 Original or Certified true copy)	Medical records of the Hospital or Clinic or the Attending Physician	
2. Hospital bill or Statement of Account (outstanding balance) with name and signature of billing clerk or Certificate of balance and promissory note signed by credit and collection officer or billing clerk (1 Original or Certified True Copy)	Billing Office of the Hospital Credit and Collection Office of the Hospital	
3. Social Case Study Report or Case Summary.(1 original copy)	Registered Social Worker in public or private practice. DSWD LSWDO NGO Medical Social Service	
MEDICAL ASSISTANCE FOR MEDICINE/ ASSISTANCE	STIVE DEVICE	
1.Medical Certificate or Clinical Abstract or Discharge Summary or Alagang Pinoy Tagubilin Form with Diagnosis with complete name, license number and signature of the Physician issued within three months (Original / Certified true copy)	Medical records of the Hospital or Clinic or the Attending Physician	
2.Prescription with date of issuance, complete name, license number and signature of the Physician issued within three months	Attending Physician from a hospital or clinic.	
If the amount of assistance being requested exceeds PhP10,000.00, the following shall be required as additional requirements		
1.Quotation of Laboratory	Service Provider	
2.Social Case Study Report or Case Summary.	Registered Social Worker in public or private practice. DSWD LSWDO NGO	





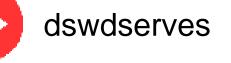


Medical Social Service

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WHAT ARE THE REQUIREMENTS? WHERE TO SECURE MEDICAL ASSISTANCE FOR LABORATORY 1.Medical Certificate or Clinical Abstract or Discharge Summary or Alagang Pinoy Tagubilin Form with Diagnosis with complete name, Attending Physician or from Medical Records of license number and signature of the Physician the hospital or clinic. issued within three months (Original or Certified true copy) 2.Laboratory Requests or Laboratory Protocol or Doctor's Order with name, license number, and Attending Physician from a hospital or clinic signature of the Physician If the amount of assistance being requested exceeds PhP10,000.00, the following shall be required as additional requirements 1. Quotation of Laboratory Service Provider Registered Social Worker in public or private practice. 2. Social Case Study Report or Case Summary. DSWD LSWDO NGO Medical Social Service FUNERAL ASSISTANCE FOR FUNERAL BILL City or Municipal Hall (Civil Registry Office), Certificate or Certification from 1.Death Hospital, Funeral Parlor, Tribal Chieftain or Tribal Chieftain (Original or certified true copy Imam Authorized staff of the Funeral Parlor or 2.Promissory Note or Certificate of Balance or Memorial Chapel Statement of account 3. Funeral Contract Authorized staff of the Funeral Parlor or Memorial Chapel FUNERAL ASSISTANCE FOR TRANSFER OF CADAVER 1.Death Certificate or Certification from the City or Municipal Hall (Civil Registry Office), Tribal Chieftain (Original or certified true copy) hospital, funeral parlor, tribal chieftain or Imam. City or Municipal Hall 2.Transfer Permit **EDUCATIONAL ASSISTANCE** School where the beneficiary is enrolled 1. Validated School ID and Valid I. D 2. (1 original/certified true copy of the following) School Registrar or Concerned Office where the a. Enrolment Assessment Form or b. Certificate of Enrolment or Registration; or beneficiary is enrolled c. Statement of Account FOOD ASSISTANCE FOR INDIVIDUAL AND FAMILIES ENDORSED IN

GROUPS

1.Barangay Certificate or Residency or Barangay Hall where the client is presently Certificate of Indigency or Certificate that the client is in need of assistance may be required

or medical document as proof that the Hospital where the beneficiary is currently beneficiary is admitted















WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE
CASH ASSISTANCE FOR OTHER SUF	PORT SERVICES
Depending on the circumstances: a. For Fire Victims: Police Report or Bureau of Fire Protection Report from the Bureau of Fire b. For Distressed OFs: Passport, Travel Document/s, certification from OWWA or the Barangay c. For Rescued Client: Certification from a social worker or Case manager from rescued clients. d. For victims of Online Sexual Exploitation: a. Police Blotter and social worker's certification for the victims of online b. sexual exploitation of children e. For Locally stranded individuals (LSI): LSI	Bureau of Fire or PNP Overseas Workers Welfare Administration or Department of Migrant Workers or Barangay Local Social Welfare and Development Office or other social welfare agencies Local Social Welfare and Development Office or other social welfare agencies Police Station
b. sexual exploitation of children	Police Station Hospital or Clinic
For all other incidents: Barangay Certificate of Residency or Certificate of Indigency or Certificate of the Client is in Need of Assistance as well as other documents from legal authorities or regulating agencies, as may be applicable such as but not limited to Police Report or Blotter, Spot report from the AFP or PNP, Joint AFP-PNP Intelligence Committee (JAPIC) certificate, Certification of death, Disaster Assistance Family Access Card (DAFAC); Medico-legal certification	 Police Station AFP or PNP Office of Civil Registry Certificate from the LDRMO; <i>or</i> Local Government Unit
MATERIAL ASSISTANCE	
1.General Intake Sheet	SWAD
2.Material Assistance Distribution Sheet	SWAD

















CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
OFF-SITE TRANSACTIO	N		
1. Present pertinent document	None	10 Minutes	Divine Grace R. Lecias Social Welfare Officer II
2. Submit pertinent documents for Interview and Assessment	None	30 Minutes	Divine Grace R. Lecias Social Welfare Officer II
3. Receive Assistance and fill out Client Satisfaction Measurement Survey	None	5 Minutes	Divine Grace R. Lecias Social Welfare Officer II















VI. PROCESSING TIME

40 Minutes

VII. FEEDBACKS AND COMPLAINTS MECHANISM

How to send feedback	The client or referring party could express their feedback through the Client Satisfaction Measurement Form that would be given at the end of the client's transaction in the Crisis Intervention Unit/Section (CIU/S) or through https://t.ly/DPvRR which will be given after they were assessed by the social worker where or not they receive assistance
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How to file a complaint	CIU/CIS and SWAD Offices shall implement two mechanisms for handling grievances and complaints which are (1) Written Communication and Email which is handled by the Grievance Focal Person (GFP), and (2) Personal or Onsite Complaints thru the establishment of the Public Assistance Complaint Desk (PACD). A complaint may be filed through any of the established modalities: • Personal appearance (walk-in clients) through the Public Assistance and Complaints Desk- electronic email where concerns can be send to ciu.fo7@dswd.gov.ph • Letters addressed to the Regional Director, Ms. Shalaine Marie S. Lucero, DSWD Field Office VII or through our OIC-Division Chief of Protective Service Division, Ms. Emma F. Patalinghug or Ms. Clavel C. Saycon SWO-IV/ Section Head of Crisis Intervention Section • Through 8888 Citizen's Complaint Center

How complaints are processed

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Step 2: Action and Response

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Step 3: Monitoring

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In cases that the client persisted to be unresolved with the intervention despite the diligent effort of the PACD Officer to assist them with their case, the PACD Officer shall be required to prepare an incident report and escalate the concern with the management.

Contact Information of ARTA, PCC and CCB

Anti-Red Tape Authority (ARTA)

complaints@arta.gov.ph

8-478-5093

Presidential Complaint Center (PCC)

pcc@malacanang.gov.ph

8888

Contact Center ng Bayan (CCB)

email@contactcenterngbayan.gov.ph

0908-881-6565











I. OFFICE OR DIVISON

SOCIAL WELFARE AND DEVELOPMENT (SWAD) SIQUIJOR

II. SCHEDULE OF AVAILABILITY OF SERVICE

MONDAY – FRIDAY (8:00 AM – 5:00 PM)

III. WHO MAY AVAIL OF THE SERVICE

G2G – GOVERNMENT TO GOVERNMENT

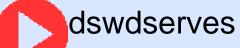
WHAT ARE THE REQUIREMENTS	WHERE TO SECURE
Duly signed Memorandum of Agreement (MOA) or Memorandum of Understanding (MOU)	Local Government Unit (Office of
	Local Government Unit (Office of the Mayor)
Duly signed Project Proposal	Local Government Unit (Office of the Mayor/ C/MSWDO)
Weight Monitoring Report (Form 3.A)	C/MSWDO (Child Development Center/ Child Development Worker)/ (Supervised Neighborhood Play/ Supervised Neighborhood Play Worker)
Master list of Beneficiaries (Form 2.A)	C/MSWDO (Child Development Center/ Child Development Worker)/ (Supervised Neighborhood Play/ Supervised Neighborhood Play Worker)
Master list of Child Development Centers (Form 2.B)	Local Government Unit (C/MSWDO)















IV. HOW TO AVAIL

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
I. Social Preparation for the Imp	olementatio	on of SFP (LGU	to Field Offices)
1. LGU to submit the required documents for the program inclusion per Day Care Centers/ Supervised Neighborhood Play	None	43 days	Ma. Romilene C. Padilla
2. Comply with the necessary signatures /action needed for the processing of the documents.	None		DSWD Field Office SFP Focal Person
3. LGU to participate to the program orientation	None	1 day	
II. Creation of Cycle Menu and	Supervision	on of Feeding Ir	nplementation
4. Assist in the Conduct of Market Research	None		Ma. Romilene C. Padilla DSWD Field Office SFP Focal Person











IV. HOW TO AVAIL

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
5. Participation in the creation of cycle menu	None	1 day	
6. Finalization of the Cycle menu	None	21 days	
7. Implement the approved cycle menu	None	20 days	Ma. Romilene C.
			Padilla DSWD Field Office SFP Focal
8. Receives and the food and assist in the delivery of foods to the beneficiaries based on distribution plan	None	123 days	Person
9. Submit the Accomplishment Report	None	7 days	













IV. HOW TO AVAIL

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
III. Monitoring and Evaluation (Field Office	e to Local Gover	nment Unit)
10. Coordinate with the Field Office for technical assistance	None	5 days and 4 hours	
11. Provide feedback, issues and concerns on the SFP implementation	None	minutes	Ma. Romilene C. Padilla DSWD Field Office SFP Focal Person
12. Respond to Client Satisfaction Survey Form	None		

V. PROCESSING TIME

357 days, 12 hours and 10 minutes

VI. FEEDBACK AND COMPLAINTS MECHANISM

LANDLINE NUMBER: 231-2172 local 17104

EMAIL ADDRESS: sfp.fo7@dswd.gov.ph















PROCEDURE FOR SOCIAL PENSION PROVISION TO INDIGENT SENIOR CITIZENS

I. OFFICE OR DIVISON

SOCIAL WELFARE AND DEVELOPMENT (SWAD) SIQUIJOR

II. SCHEDULE OF AVAILABILITY OF SERVICE

MONDAY – FRIDAY (8:00 AM – 5:00 PM)

III. WHO MAY AVAIL OF THE SERVICE

G2C – GOVERNMENT TO CITIZEN

WHAT ARE THE REQUIREMENTS	WHERE TO SECURE
One (1) photocopy of the OSCA ID or any Valid Government-Issued ID indicating the birth date of the senior citizens such as but not limited to the following: 1. PhilSys ID 2. Driver's License 3. Philhealth ID 4. Voter's ID 5. Postal ID 6. Federation ID	OSCA at Local Government Unit or any Government Agency issuing government ID
One (1) original copy of the fully accomplished and signed Social Pension Application Form	The indigent senior citizen applicant shall inquire and/or submit the needed documentary requirements to the following: 1. Barangay Senior Citizens Association 2. Office of the Senior Citizens Affair (OSCA) 3. Local Social Welfare and Development Office (LSWDO) 4. DSWD Field Office through the Regional Social Pension Unit (DSWD FO-RSPU) 5. DSWD Central Office through the Older Persons Unit under the Program Management Bureau (DSWD CO-OPU) BSCA/ OSCA/ LSWDO/ DSWD FO-RSPU to provide one (1) copy of the Social Pension Application Form to the indigent senior citizen applicant.
	*no application is processed in the DSWD CO-OPU. All applications will be endorsed to the DSWD FO-RSPU.

IV. HOW TO AVAIL

FEES TO BE PAID

PROCESSING TIME

PERSON RESPONSIBLE

APPLICATION AND PRESENTATION OF NECESSARY DOCUMENTARY REQUIREMENTS OF THE INDIGENT SENIOR CITIZEN TO THE SOCIAL PENSION PROGRAM

*the same client steps shall be applied to indigent senior citizens re-applying to the program due to possible previous removal or inactivity to the social pension.

- A. INDIGENT SENIOR CITIZEN APPLIES FOR SOCPEN THROUGH EITHER OF THE FOLLOWING OFFICES LOCATED AT THEIR CITY/ MUNICIPALITY
 - a. Barangay Senior Citizens Association (BSCA)
 - b. Office for Senior Citizens Affairs (OSCA)
 - c. Local Social Welfare and Development Office (LSWDO)

*As recommended, the LGU processes shall be excluded from this citizens' charter thus the LGUs shall prepare a Citizens' Charter to ensure accountability and responsiveness between the DSWD and LGUs. Nonetheless, it must be noted that SocPen application processing through the BSCA/OSCA/LSWDO is the most utilized service modality in the regions.

B. INDIGENT SENIOR CITIZEN APPLIES FOR SOCPEN THROUGH THE DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT FIELD OFFICE - REGIONAL SOCIAL PENSION UNIT (DSWD FO-RSPU)

1. The indigent senior citizen applicant goes to the DSWD FO-RSPU to apply for his/her possible inclusion in the Social Pension Program	None 1.1.The DSWD FO-RSPU Focal/Staff is to provide a copy of the Social Pension Application Form to the Indigent Senior Citizens.	30 minutes *processing time for the indigent senior citizen to	Daisy C. Lor Focal Person
2. The indigent senior citizen applicant fills up and submits the accomplished Social Pension Program Application Form to the DSWD FO-RSPU	2.1.The DSWD FO-RSPU Focal/Staff shall assist the indigent senior citizen applicant in filling up the form and provide the necessary information to the senior citizen regarding his application.	complete his/her presentation of interest to apply to SocPen at the RSPU.	Daisy C. Lor Focal Person
	 2.1.1.The DSWD FO-RSPU Focal/Staff shall None accept and verify the completeness of the accomplished application form together with one (1) original and/or photocopy of the OSCA ID or any valid government-iss ued ID indicating the birthdate of the senior citizen presented. 2.1.2The DSWD FO-RSPU Focal/Staff shall notify and/or endorse the concerned LGUs for initial validation of applications such as confirmation of residence, etc. upon receipt of applications from walk-in clients. 		
	Note: The DSWD FO-RSPU Focal/Staff may provide one (1) photocopy of the received application form to the indigent senior citizen for record purposes. It is further recommended that the applicant presents his/her original copy of OSCA ID and/or any government-issued IDs for verification purposes.		













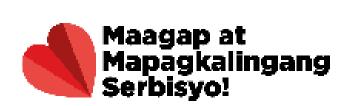


PROCEDURE FOR SOCIAL PENSION PROVISION TO INDIGENT SENIOR CITIZENS

IV. HOW TO AVAIL

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
C. INDIGENT SENIOR CITIZEN GOES TO THE DSWD CENTRAL ENDORSEMENT TO THE DSWD FO - RSPU	OFFICE - OLDER PERSONS UNIT TO SIG	SNIFY INTEREST IN AP	PLYING TO SOCPEN FOR
The Indigent senior citizens applicant goes to the DSWD CO-OPU to signify interest in applying to the Social Pension Program as a possible beneficiary.	receives and interviews the indigent senior citizen applicant through walk-in, phone-in, and email inquiries to get the following information for None referral to the appropriate Field Office: a. Name b. Age and Birthdate c. Address d. Contact Information e. Other pertinent details on the application Note: There shall be no processing of program applications being done at the Central Office level. The RSPU shall conduct the necessary application procedures. All application requests received by the DSWD CO-OPU shall be officially communicated with the senior citizen's information to their respective DSWD FO-RSPU for action. It is further recommended that the applicant presents his/her original copy of OSCA ID and/or any government-issued IDs for verification purposes.	*processing time for the indigent senior citizen to complete his/her presentation of interest to apply to SocPen at the DSWD CO	Daisy C. Lor Focal Person
II. THE INDIGENT SENIOR CITIZEN APPLICANTS WILL BE SUBJECTED FOR VALIDATION AND ASSESSMENT BASED ON THE PROGRAM CRITERIA 2. The indigent senior citizen applicant undergoes validation and assessment to determine if he/she is eligible for the social pension.	2.1.DSWD FO-RSPU Focal/ Staff shall schedule and inform through a written letter and/or other tangible means of communication such as None email/ text message, etc. the OSCA/ LSWDO on the conduct of validation and assessment based on either/or of the following received consolidated and certified list from the LSWDO/ walk-in applicants/ referrals from different stakeholders to the RSPU, as follows: a. List of potential beneficiaries s - new applications b. List of potential beneficiaries - re-application (if any) c. List of delisted and replacement beneficiaries for inclusion in the beneficiaries to be validated/re-validated by the RSPU. 2.2DSWD FO-RSPU Focal/ Staff shall take the lead in the conduct of the validation of the indigent senior citizen applicants, validating the information provided, using the General Intake Sheet (GIS) to determine the eligibility to the program. 2.2.1. Assessment of the beneficiary will be written in the General Intake Sheet (GIS) or the Social Pension Beneficiary Update Form (SPBUF) and shall be the basis for the final list of beneficiaries to be encoded in the Social Pension Information System (SPIS) and endorsed for cross-matching to the DSWD-OPU. 2.2.2. The LSWDO shall also submit the list of delisted/replacement SocPen beneficiaries for validation and assessment of potential beneficiaries shall be done through an interview during the home visit.		Daisy C. Lor Focal Person OSCA Head/ Representative LSWDO Head/ Representative
III. THE SOCIAL PENSION BENEFICIARY IS NOTIFIED, O	SOES TO THE PAYOUT VENUE AND	RECEIVES HIS/ HEF	R STIPEND
3. The SocPen beneficiary is notified of his/ her qualification to the program.	3.1 The DSWD FO-RSPU Focal/ Staff shall endorse to the OSCA/LSWD O the approved list of SocPen beneficiaries. The OSCA Head shall then notify the senior citizen None through a written letter and/or other tangible means of communication such as email/ text message, etc. of his/her inclusion as a beneficiary of he program.	None	Daisy C. Lor Focal Person OSCA Head/ Representative LSWDO Head/ Representative
4. Appear during the payout schedule a. Present the original and/or photocopy copy of his/her OSCA ID or any valid government issued ID/federation ID indicating his/her date of birth.	4.1 The DSWD FO-RSPU Focal/Staff and/or the LGU shall conduct to the SocPen beneficiaries and/or their authorized representatives on the procedure of the program.	*maximum processing time a social pension beneficiary undergoes in a payout as it depends on the number of SocPen beneficiaries present at the payout to receive his/her stipend.	Daisy C. Lor Focal Person Identified DSWD or LGU SDOs (*positions of assigned SDO shall depend on the FOs and LGUs) BSCA Head/ Representative OSCA Head/ Representative LSWDO Head/ Representative















PROCEDURE FOR SOCIAL PENSION PROVISION TO INDIGENT SENIOR CITIZENS

IV. HOW TO AVAIL

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
In cases of SocPen beneficiary who cannot personally appear at the payout venue, S/he may designate his/her authorized representative and shall present and submit the original and photocopy of the following requirements: a. Authorized representative's valid government issued ID or any valid certificate such as birth certificate, etc. b. SocPen beneficiary's OSCA ID or any validgovernment issued ID. c. Authorization/ certification letter from the beneficiary indicating the name of the authorized representative and the reason/s of inability to personally claim his/her stipend at the time of the payout.	4.1.1 The DSWD FO SDOs/ None LGU SDOs shall ensure the completeness and authenticity of the presented requirements by the SocPen beneficiary before releasing the stipend.	** Please note that the payout for one barangay is a whole-day activity and may take up to 5 days for the whole LGU.	
IV. FILLING OUT OF THE CLIENT SATISFACTION MEAS	UREMENT FORM		
5. The SocPen beneficiary or his/her authorized representative shall accomplish the Client Satisfaction Measurement Form (CSMF) to rate the services provided by the DSWD. The accomplished CSMF shall be submitted to the DSWD FO-RSPU Focal/Staff.	5.1 The DSWD FO-RSPU Focal/Staff		Daisy C. Lor Focal Person
	TOTAL: None	13 hours and 40 minutes for the total processing time a SocPen Beneficiary and/or his/her authorized representative undergoes from application, validation, notification, payout, and accomplishment of CSMF regardless of where s/he applies. *Processing time depends on the number of beneficiaries per Barangay, per LGU, and the output capability of SDOs.	

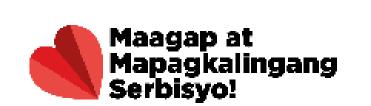
NOTE: This Citizens' Charter (CC) is limited to the DSWD processes involving the client - the indigent senior citizen applicant and the SocPen beneficiaries. The CC shall cover the following procedures, as follows: (1) application and presentation of documents of the indigent senior citizen, (2) participation of the indigent senior citizen in the validation and assessment, (3) notification and attendance of the SocPen beneficiary to the cash payout through the DSWD or LGUs under TOF, (4) Filling out of the CSMF of the SocPen Beneficiaries or his/her authorized representative.

Other DSWD processes not directly involving the client shall be separated and included in the program's Standard Operating Procedures. The processing of eligibility and release of cash advances of the social pension payment is a separate process being done by the DSWD Field Office in coordination with the concerned LGUs.

The SPISC is currently implementing two modes of payments, (a) Cash Payment through identified SDOs and (2) Transfer of funds to LGUs, hence, there may be differences in the turnaround/processing time. The SocPen Team needs staff augmentation from other programs/units for the conduct of simultaneous pay-outs

Considering the huge number of beneficiaries per region. It is further noted that the program has no plantilla personnel, hence the pay out depends on the number of SDOs of other programs/units who are available to handle the social pension cash advances.















PROCEDURE FOR SOCIAL PENSION PROVISION TO INDIGENT SENIOR CITIZENS

VI. FEEDBACK AND COMPLAINTS MECHANISM

HOW TO SEND FEEDBACK	REQUESTOR TO FILL OUT THE CLIENT SATISFACTION SURVEY FORM AND EMAIL IT TO socpen.fo7@dswd.gov.ph
HOW FEEDBACKS ARE PROCESSED	FEEDBACK WILL BE CONSOLIDATED, TABULATED AND ANALYZED AS A BASIS FOR IMPROVEMENTS OR COMMENDATIONS.
HOW TO FILE A COMPLAINT	COMPLAINTS CAN BE FILED THROUGH A LETTER ADDRESS TO THE REGIONAL DIRECTOR. MAKE SURE TO PROVIDE THE FOLLOWING INFORMATION: - NAME OF PERSON BEING COMPLAINED - INCIDENT - EVIDENCE IF THERE'S ANY FOR INQUIRES AND FOLLOW-UPS, CLIENT MAY CONTACT THE FOLLOWING CONTACT INFO: TEL NO.: (032) 232-9505, (032) 233-0261, (032) 233-8785 LOCAL 17119 TELEFAX: (032) 231-2172 EMAIL: socpen.fo7@dswd.gov.ph
HOW COMPLAINTS ARE PROCESSED	COMPLAINTS RECEIVED ARE REVIEWED BY THE GRIEVANCE FOCAL. IT WILL BE RELAYED AND DISCUSSED DURING THE STAFF MEETING. A VALIDATION SHALL BE CONDUCTED IF NECESSARY, AS THE BASIS OF THE REPORT WHICH WILL BE SIGNED BY THE REGIONAL DIRECTOR. SUCH REPORT WILL BE SENT TO THE COMPLAINANT WITHIN THREE (3) DAYS UPON RECEIPT OF THE COMPLAINT VIA EMAIL OR SNAIL MAIL WHICHEVER IS APPLICABLE. FOR INQUIRES AND FOLLOW-UPS, CLIENT MAY CONTACT THE FOLLOWING CONTACT INFO:
	TEL NO.: (032): 231-2172 local 17147 TELEFAX: (032): 231-2172 Email: socpen.fo7@dswd.gov.ph
CONTACT INFORMATION OF CCB, PCC, ARTA	ARTA: complaints@arta.gov.ph 8478-5093/ 8478-5099 PACe: pace@op.gov.ph 8888 CCB: SMS: 0908-881-6565 Email: email@contactcenterbayan.gov.ph WEB: https://contactcenterngbayan.gov.ph FACEBOOK: https://facebook.com/civilservicegovph CALL: 165 65 (P5+VAT PER CALL ANYWHERE IN THE PHILIPPINES VIA PLDT LANDLINES)













Provision of Centenarian Gifts to Centenarians

I. OFFICE OR DIVISON

SOCIAL WELFARE AND DEVELOPMENT (SWAD) SIQUIJOR

II. SCHEDULE OF AVAILABILITY OF SERVICE

MONDAY – FRIDAY (8:00 AM – 5:00 PM)

III. WHO MAY AVAIL OF THE SERVICE

All Filipino citizens who reached the age of 100 years old

G2C – GOVERNMENT TO CITIZEN

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE			
For Living Centenarians: (One original or one certified true copy)				
(One original of one certif	red true copy)			
Birth certificate	Philippine Statistics Authority (PSA) or Local Civil Registrar (LCR)			
Philippine Passport	Department of Foreign Affairs (DFA)			
Identification cards	Office for Senior Citizens Affairs (OSCA); Land Transportation (LTO)-issued Driver's License; social security cards like the Government Service Insurance System (GSIS) and Social Security System (SSS); Professional Regulatory Commission (PRC) license; Philippine Postal; Commission on Elections (COMELEC); Philippine Identification System; Philhealth MDR			
Marriage Certificate Birth Certificates of children Affidavit executed by at least two (2) disinterested persons Old School or Employment records	Philippine Statistics Authority (PSA) or Local Civil Registrar (LCR) Philippine Statistics Authority (PSA) or Local Civil Registrar (LCR)			
	Lawyer (either public or private)			
	School or Employment agency			
Baptismal and/or Confirmation records	Parish church and other religious denomination			
Medical and/or Dental examination	Government / private doctors or dentist			
Other related documents	National Commission on Muslim Filipinos (NCMF) / National Commission on Indigenous People (NCIP); AFPSLAI, AMWSLAI, Veterans			
For Deceased Center	enarians:			
(One original or one certif	fied true copy)			
Death certificate	Philippine Statistics Authority (PSA) or Local Civil Registrar (LCR)			
Identification card of the nearest surviving relative	Office for Senior Citizens Affairs (OSCA); Land Transportation (LTO)-issued Driver's License, social security cards like the Government Service Insurance System (GSIS), and Social Security System (SSS), Professional Regulatory Commission (PRC) license, Philippine Postal, Commission on Elections (COMELEC); Philippine Identification System; Philhealth MDR			
Proof of Relationship • Certificate of live birth of the nearest surviving relative	Philippine Statistics Authority (PSA) or Local Civil Registrar (LCR) Parish			
Marriage CertificateBaptismal	church and other religious denomination			
Affidavit of Adjudication and/or Special Power of Attorney	Lawyer (either public or private)			
Warranty and Release from Liability	DSWD Field Offices			

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Centenarian and/or nearest surviving applicant submit theone (1) original or one (1) certified true copy of the necessary documentary requirements to the Office for Senior Citizens Affairs (OSCA)	 1.1. The DSWD FO shall receive the masterlist of potential Centenariansthrough the following: a. Submitted consolidated list from the Local Government Units through the OSCA b. b. Endorsement from legislators; Office of the President, among others; c. Walk-in clients 1.2. The DSWD FO shall conduct desk or home validation to the identified potential centenarians and/or nearest surviving relative If assessed as eligible, the DSWD FO shall send a letter duly signed by the DSWD Regional Director citing the eligibility of the applicant. The LGU shall then inform the centenarian and/or nearest surviving relative applicant. 	None	Desk Validation 3 working days Home Validation 15 working days	Daisy C. Lor Focal Person
	If the documents submitted are incomplete and/or with discrepancy, the DSWD FO shall inform and request the LGU to provide technical assistance to the centenarian and/or nearest surviving relative applicants to comply with the additional requirements and/or reconcile the documents with discrepancies.			

*Documents stated in the living centenarians, shall also be required to be submitted by the nearest surviving relative of the deceased centenarians that will prove the deceased centenarians' age eligibility at the time RA 10868 took effect if any















Provision of Centenarian Gifts to Centenarians

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
2. Centenarian and/or nearest surviving relative receive the centenarian Benefit	2.1. The DSWD FO shall facilitate the preparation of documents such as disbursement voucher, obligation request, payroll, etc. corresponding to the number of eligible centenarians to be awarded.	None	5 working days	Daisy C. Lor Focal Person
	2.2. The DSWD FO shall prepare a notification letter to	None	3 working days	

VI. FEEDBACK AND COMPLAINTS MECHANISM

VI. FEEDBACK AND COMPLAIN IS	
HOW TO SEND FEEDBACK	REQUESTOR TO FILL OUT THE CLIENT SATISFACTION SURVEY FORM AND EMAIL IT TO centenarian.fo7@gmail.com
HOW FEEDBACKS ARE PROCESSED	FEEDBACK WILL BE CONSOLIDATED, TABULATED AND ANALYZED AS A BASIS FOR IMPROVEMENTS OR COMMENDATIONS.
HOW TO FILE A COMPLAINT	COMPLAINTS CAN BE FILED THROUGH A LETTER ADDRESS TO THE REGIONAL DIRECTOR. MAKE SURE TO PROVIDE THE FOLLOWING INFORMATION: - NAME OF PERSON BEING COMPLAINED - INCIDENT - EVIDENCE IF THERE'S ANY FOR INQUIRES AND FOLLOW-UPS, CLIENT MAY CONTACT THE FOLLOWING CONTACT INFO: TEL NO.: (032) 232-9505, (032) 233-0261, (032) 233-8785 LOCAL 17119 TELEFAX: (032) 231-2172 EMAIL: centenarian.fo7@gmail.com
HOW COMPLAINTS ARE PROCESSED	COMPLAINTS RECEIVED ARE REVIEWED BY THE GRIEVANCE FOCAL. IT WILL BE RELAYED AND DISCUSSED DURING THE STAFF MEETING. A VALIDATION SHALL BE CONDUCTED IF NECESSARY, AS THE BASIS OF THE REPORT WHICH WILL BE SIGNED BY THE REGIONAL DIRECTOR. SUCH REPORT WILL BE SENT TO THE COMPLAINANT WITHIN THREE (3) DAYS UPON RECEIPT OF THE COMPLAINT VIA EMAIL OR SNAIL MAIL WHICHEVER IS APPLICABLE. FOR INQUIRES AND FOLLOW-UPS, CLIENT MAY CONTACT THE FOLLOWING CONTACT INFO: TEL NO.: (032): 231-2172 local 17147 TELEFAX: (032) 231-2172 Email: centenarian.fo7@gmail.com
CONTACT INFORMATION OF CCB, PCC, ARTA	ARTA: complaints@arta.gov.ph 8478-5093/ 8478-5099 PACe: pace@op.gov.ph 8888 CCB: SMS: 0908-881-6565 Email: email@contactcenterbayan.gov.ph WEB: https://contactcenterngbayan.gov.ph FACEBOOK: https://facebook.com/civilservicegovph CALL: 165 65 (P5+VAT PER CALL ANYWHERE IN THE PHILIPPINES VIA PLDT LANDLINES)













PROCESS FOR REFERRALS RECEIVED THROUGH INDIVIDUAL/ GROUP/ ASSOCIATION OR ORGANIZATION REFERRED FROM OBSUS, NGAS, NGOS, CSOS, LGUS and OTHER INSTITUTIONS

I. OFFICE OR DIVISION

SOCIAL WELFARE AND DEVELOPMENT (SWAD) SIQUIJOR

II. SCHEDULE OF AVAILABILITY OF SERVICE

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

III. WHO MAY AVAIL OF THE SERVICE

G2C – Government to Citizens

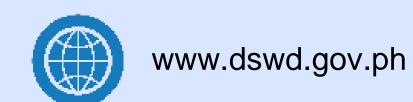
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IV. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. File the application for livelihood assistance from SLP-NPMO, OBSUs, NGAs, NGOs, CSOs, LGU, and other institutions through email.	None	10 minutes	Abelardo M. Pusod PDO II- PC or Field Project Development Officer
2. Wait for call/email/text or personal visit of the Project Development Officer (PDO) from the SLP-RPMO or SLP-Provincial Office.	None	6 hours	Abelardo M. Pusod PDO II- PC or Field Project Development Officer
3. Wait for call/email/text or personal visit of the IPDO from SLP-Provincial Office.	None	10 minutes	PC- IPDO
4. Undergo the SLP Means Test (for NO MATCH referrals in the Listahanan database)	None	6 hours	Field PDO (Implementing PDO and Monitoring PDO)
5. Accomplish the SLP Data Privacy Consent Form	None	10 minutes	Abelardo M. Pusod PDO II- PC / IPDO
6. Participate in the SLP Orientation (for eligible referrals)	None	30 minutes	Abelardo M. Pusod PDO II- PC / IPDO
7. Accomplish the Letter of Intent or SLP Waiver Form	None	15 minutes	Abelardo M. Pusod PDO II- PC / IPDO
8. Accomplish the SLP Profile Form	None	20 minutes	Abelardo M. Pusod PDO II- PC / IPDO
9. Accomplish the Livelihood Skills Assessment Form (LSAF)	None	6hours	Field PDO















PROCESS FOR REFERRALS RECEIVED THROUGH INDIVIDUAL/ GROUP/ ASSOCIATION OR ORGANIZATION REFERRED FROM OBSUS, NGAS, NGOS, CSOS, LGUS and OTHER INSTITUTIONS

IV. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
10. Participate in the Micro-Enterprise Development Training 1 (MEDT 1) and Basic Employment Skills Training (BEST 1)	None	4 hours	IPDO/ Abelardo M. Pusod PDO II- PC
11. Prepare and sign the Modality Application Form (MAF)	None	2 hours	Field Project Development Officer
12. Receive the SLP Grant	None	6 hours	IPDO/ Abelardo M. Pusod PDO II- PC
13. Fill-out the Client Satisfaction Measurement Form (CSMF)	None	5 minutes	Abelardo M. Pusod PDO II- PC / IPDO

V. PROCESSING TIME

Activities to be undertaken by SLP-NPMO/ SLP-RPMO – 7 hours Activities to be undertaken by SLP-RPMO – 11 days and 5 hours **Total**- 12 days and 4 hours















PROCESS FOR THE PROVISION OF LIVELIHOOD ASSISTANCE TO WALK-IN CLIENTS

I. OFFICE OR DIVISION

SOCIAL WELFARE AND DEVELOPMENT (SWAD) SIQUIJOR

II. SCHEDULE OF AVAILABILITY OF SERVICE

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

III. WHO MAY AVAIL OF THE SERVICE

G2C – Government to Citizens

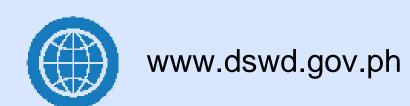
WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE
Photocopy of any valid identification of the client/ person applying for Livelihood Assistance Grants	Government Agencies issuing identification cards such as SSS, Philhealth, PAG-IBIG, LTO, DFA, PRC, COMELEC, NBI, and others.

IV. HOW TO AVAIL OF THE SERVICE

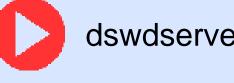
CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Accomplish the SLP Data Privacy Consent Form and Attendance	None	10 minutes	Abelardo M. Pusod PDO II- PC
Sheet			or Field Project Development Officer
2. Participate in the SLP Orientation	None	1 hour	Abelardo M. Pusod PDO II- PC
			or Field Project Development Officer
3. Claim the SLP Reference Slip	None	10 minutes	Abelardo M. Pusod PDO II- PC / IPDO
4. Fill-out the Client Satisfaction Measurement Form (CSMF)	None	5 minutes	PC-Abelardo M. Pusod PDO II- PC / IPDO
5. Wait for the call/email/text or personal visit of the IPDO from the SLP Provincial Office	None	2 hours	Abelardo M. Pusod PDO II- PC / IPDO
6. Undergo the SLP Means Test	None	6 hours	Abelardo M. Pusod PDO II- PC / IPDO
7. Accomplish the SLP Data Privacy Consent Form	None	10 minutes	Abelardo M. Pusod PDO II- PC / IPDO
8. Participate in the SLP Orientation	None	30 minutes	Abelardo M. Pusod PDO II- PC / IPDO















PROCESS FOR WALK-IN INDIVIDUAL SEEKING LIVELIHOOD ASSISTANCE

IV. HOW TO AVAIL OF THE SERVICE

CLIENT CTEDC7	FEES TO BE		PERSON
CLIENT STEPSZ	PAID	PROCESSING TIME	RESPONSIBLE
9. Accomplish the Letter of Intent or SLP Waiver Form	None	15 minutes	Abelardo M. Pusod PDO II- PC
			or Field Project Development Officer
10. Accomplish the SLP Profile Form	None	20 minutes	Abelardo M. Pusod PDO II- PC / IPDO
11. Accomplish the Livelihood Skills Assessment Form (LSAF)	None	6 hours	Abelardo M. Pusod PDO II- PC / IPDO
12. Participate in the Micro-Enterprise Development Training 1 (MEDT 1) and Basic Employment Skills Training (BEST 1)	None	4 hours	IPDO/ Abelardo M. Pusod PDO II- PC
13. Prepare and sign the Modality Application Form (MAF)	None	2 hours	Field Project Development Officer
14. Receive the SLP Grant	None	6 hours	IPDO/ Abelardo M. Pusod PDO II- PC
15. Fill-out the Client Satisfaction Measurement Form (CSMF)	None	5 minutes	Abelardo M. Pusod PDO II- PC / IPDO

V. PROCESSING TIME

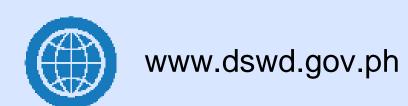
Activities to be undertaken by SLP-NPMO/ SLP-RPMO – 1 day, 1 hour and 15 minutes

Activities to be undertaken by SLP-RPMO – 11 days, 2hours and 5 hours

Total - 12 days and 4 hours















GRIEVANCE MANAGEMENT PROCESS

I. OFFICE OR DIVISION

SOCIAL WELFARE AND DEVELOPMENT (SWAD) SIQUIJOR

II. SCHEDULE OF AVAILABILITY OF SERVICE

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

III. WHO MAY AVAIL OF THE SERVICE

All DSWD FOs, DSWD OBSUs, or other Agencies/Institutions Citizen/ Program Participants

WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE
1.Filled-up SLP Grievance Form – for walk-in clients; 2.Complaint letter received from OBSUs, NGAs, NGOs, concerned citizen, social media and others; and 3. Supporting documents -Clients Testimony -Witness Testimony (if necessary) -Barangay/ Police report (if necessary)	SLP Regional Management Office DSWD Field Office VII Cebu City

IV. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. The clients shall	None	3 minutes	Abelardo M. Pusod
ratify or concur on			PDO II- PC
the Data Privacy			
Consent's content.			
Proceed to customer step number 2 after approval.			
2. Fill-up the walk-in	None	2 minutes	Abelardo M. Pusod
logbook			PDO II- PC
3. Fill-out the SLP	None	10 minutes	Abelardo M. Pusod
Grievance Form			PDO II- PC
1 Pagaiyad tha Walk in	Nlono	2 minutos	Abolarda M. Dugad
4. Received the Walk-in	None	3 minutes	Abelardo M. Pusod
Client Slip			PDO II- PC
5. Fill-out the CSMF	None	5 minutes	Abelardo M. Pusod
			PDO II- PC
			Walk-in Client

V. PROCESSING TIME

For Grievances at the SLP-Regional Level – 30 Days

For Grievances at the SLP-Provincial Level – 27 Days

For Grievances at the SLP-Municipal Level – 7 days and 2 hours















VI. FEEDBACKS AND COMPLAINTS MECHANISM

How to send feedback

Send feedback through official email addressed to

SHALAINE MARIE S. LUCERO, CESO IV Regional Director ord.fo7@dswd.gov.ph

thru

MARIA ROSANA D. CORITICO, PDO III

SLP Regional Program Coordinator

livelihood.fo7@dswd.gov.ph

How feedbacks are processed

The GRMO verifies the nature of requests/feedbacks within one working day. The same will be referred to the Provincial Office concerned where the client is located. Upon receiving the reply from the concerned Provincial Office, the client will be informed through the contact information provided.

For follow-ups or queries, the contact information are as follows:

Contact no. (032) 2330261/ (032) 232-9505 loc 17125

Email add livelihood.fo7@dswd.gov.ph

How to file a complaint

To file a complaint, via email, written communication or SMS with the following details:

-Full name and contact information of the complainant

-Narrative of the complain

-Evidences

-Name of the person being complained

-Send all complaints

-You can file a complaint through;

DSWD Field office VII Sustainable Livelihood Program Corner MJ Cuenco andGen Maxilom Streets, Cebu City Tel no. (032) 2330261/ (032) 232-9505 loc 17125

processed

How complaints are All complaints received will be processed by the Grievance and Referral Management Officer.

> The GRMO browses evaluates, and determines the complaints received on a daily basis. The GRMO shall coordinate with the concerned Provincial Office to answer the complaint and shall investigate, if necessary. After the concern has been addressed or after the conduct of the investigation, the Provincial Coordinator shall prepare a feedback report to RPC, for appropriate action. The GRMO shall give the feedback to the clients via mail or email.

Contact Information of CCB, PCC, ARTA

MARIA ROSANA D. CORITICO

SLP Regional Program Coordinator

Email add: livelihood.fo7@dswd.gov.ph/ mrdcoritico@dswd.gov.ph

Tel No. (032) 2330261/ (032)232-9505 loc 17125

Or

Send Feedback on government services, whether positive or negative, to the

Contact Center ng Bayan via the following access channels:

SMS: 0908 881 6565

Email: email@contactcenterngbayan.gov.ph Web: https://contactcenterngbayan.gov.ph/ FB https://facebook.com/civilservicegovph/ Call: 165 65

P5+VAT per call anywhere in the Philippines via PLDT landlines















GRIEVANCE INTAKE AND RESPONSE

I. OFFICE OR DIVISION

SOCIAL WELFARE AND DEVELOPMENT (SWAD) SIQUIJOR

II. SERVICE CLASSIFICATION

SIMPLE

II. SCHEDULE OF AVAILABILITY OF SERVICE

MONDAY – FRIDAY (8:00 AM – 5:00 PM)

III. WHO MAY AVAIL OF THE SERVICE

G2C: Government to Citizens - 4Ps Beneficiaries, and General Public

WHAT ARE THE REQUIREMENTS	WHERE TO SECURE
I.INTAKE:1. 4Ps ID or 1 Valid ID (Original Copy), Any proof of grievance, if available.	4Ps Assistance Desk, Grievance Redress Unit (GRU)
II. RESPONSE: 1. Client satisfaction Form (CSF). (1 form per client)	4Ps Assistance Desk, Grievance Redress Unit (GRU)

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
I. INTAKE			
 Present the 4Ps ID for 4Ps beneficiary or 1 valid ID for non- 4Ps. 	None	2 minutes	Joan Florabel L. Felicio PDO III - GRS
2. Proceed to the 4Ps Assistance Desk for verification of identity.	None	5 minutes	Joan Florabel L. Felicio PDO III - GRS
II. RESPONSE			
3. Provide details about the grievance and supporting documents, if available, depending on the type of grievance reported.	None	27 minutes	Joan Florabel L. Felicio PDO III - GRS
4. Wait for the updates on the status of the grievance within three (3) days.	None	3 days	Joan Florabel L. Felicio PDO III - GRS
5. Receive update/feedback on the status of the grievance.	None	10 Minutes	Joan Florabel L. Felicio PDO III - GRS
6. Accomplish the client satisfaction measurement Form	None	10 Minutes	Joan Florabel L. Felicio PDO III - GRS















V. PROCESSING TIME

If grievance is resolved outright - 44 Minutes

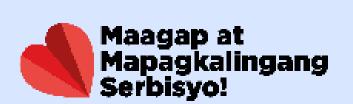
If the grievance is referred to field office for resolution and feedback is provided to the client - 3 Days

VI. FEEDBACK AND COMPLAINTS MECHANISM

LANDLINE NUMBER: 232-9505 LOC. 17128

EMAIL ADDRESS: pantawid.fo7@dswd.gov.ph















I. OFFICE OR DIVISION

SOCIAL WELFARE AND DEVELOPMENT (SWAD) SIQUIJOR

II. SCHEDULE OF AVAILABILITY OF SERVICE

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

III. WHO MAY AVAIL OF THE SERVICE

Filipino Minors Travelling Abroad

WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE
A. For Minors Traveling Alone to a Foreign	Country for the First Time
 Duly Accomplished Application Form Original Copy or Electronic Copy) 	DSWD Field Offices or download form at www.dswd.gov.ph
2. LSWDO/SWAD Social Worker's assessment, in the absence of the biological parent/s or an appointed legal guardian (1 Original Copy)	Local Social Welfare and Development Office/SWAD where the minor resides
 PSA issued Birth Certificate of Minor Original and 1 Photocopy**) 	Philippine Statistics Authority (PSA)
5. Notarized Affidavit of Consent or Written Consent of both parents/ legal guardian/solo parent, whichever is applicable. Photocopy of valid passport and valid visa or valid ID issued abroad, if parents are working abroad. (1 Original)	parent/s are abroad)
6. Original colored passport size photos of the minor (in White, Red or Blue Background) taken within the last 6 months. No scanned picture is allowed. (2 pcs.)	Applicant
7. Notarized Affidavit of Support and Certified copy of evidence to show financial capability of sponsor e.g Certificate of Employment, Latest Income Tax Return, Bank Statement, etc.) (1 Original)	Applicant or Sponsoring Person/Agency
8. PSA issued Death Certificate (for deceased parent/s) on SECPA (1 Original and 1 Photocopy)	Applicant
9. Unaccompanied Minor Certificate from the Airlines (if available)	Airline Company where ticket is obtained
10. Waiver from the parents releasing DSWD from any liability/responsibility in case of untoward incident during the travel of the child.	Applicant















WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE	
B. For Succeeding Travel of Unaccompanied	d minor or Traveling ALONE	
 Duly Accomplished Application Form (1 Original Copy or Electronic Copy) 	DSWD Field Office/ DSWD website: www.dswd.gov.ph	
2. Notarized Affidavit of Consent or Written Consent of both parents/ legal guardian/solo parent, whichever is applicable. Photocopy of valid passport and valid visa or valid ID issued abroad, if parents are working abroad. (1 Original)	at the place where the parent/s resides/Philippine Embassy (if minors	
3. Original copy of the previous Travel Clearance issued	Applicant	
4. Original colored passport size photos of the minor (in White, Red or Blue Background) taken within the last 6 months. No scanned picture is allowed. (2 pcs.)	Applicant	
5. Unaccompanied Minor Certificate from the Airlines (if available)	Airline Company where ticket is obtained	
6. Waiver from the parents releasing DSWD from any liability/responsibility in case of untoward incident during the travel of the child.		
C. Minor Travelling for the FIRST TIME with persons other than the Parents or Legal Guardian		
 Duly Accomplished Application Form Original Copy or Electronic Copy) 	DSWD Field Office/ DSWD website: www.dswd.gov.ph	
2. PSA issued Birth Certificate of Minor(1 Original and 1 Photocopy**)	Philippine Statistics Authority (PSA)	
3. Notarized Affidavit of Consent or Written Consent of both parents/ legal guardian/solo parent, whichever is applicable. Photocopy of valid passport and valid visa or valid ID issued abroad, if parents are working abroad. (1 Original)	at the place where the parent/s resides/Philippine Embassy (if minors	
4. PSA issued Marriage Contract of minor's parents/ Copy of Court issued Legal Guardianship/ Tallaq or Fasakh Certification from the Shariah Court or any Muslim Barangay or religious leader; or PSA issued CENOMAR for non-marital minors on SECPA; (1 Original and 1 Photocopy**)	Philippine Statistics Authority (PSA); Court who handled the Legal Guardianship petition; Shariah Court or Religious Leader	
5. Two (2) colored passport size pictures of the minor (in white, red or blue background) taken within the last 6 months. No scanned pictures will be accepted.		
6. Photocopy of the valid passport of the traveling companion.	Minor's traveling companion	

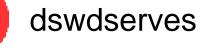
















WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE
D. Minors Traveling subsequently with a Pe	erson Other than the Parents of Legal
Guardian	
 Duly Accomplished Application Form Original Copy or Electronic Copy) 	DSWD Field Office/ DSWD website: www.dswd.gov.ph
2. Original copy of the Travel Clearance previously issued by the DSWD Field Office;	Applicant
3. Notarized Affidavit of Consent or Written Consent of both parents/ legal guardian/solo parent, whichever is applicable. Photocopy of valid passport and valid visa or valid ID issued abroad, if parents are working abroad. (1 Original)	at the place where the parent/s resides/Philippine Embassy (if minors
4. Two (2) original colored passport size photos of the minor taken within the last six (6) months. No scanned pictures will be accepted;	
5. Photocopy of the valid passport of the traveling companion.	Minor's traveling companion
Additional Requirements for Minors Under	Special Circumstances:
For Filipino Minors Migrating to Another Co	ountry
1. Visa Petition Approval	Applicant
For Minors Studying Abroad	
	Applicant
For Minors who will attend Conference, Stu Program, Summer Camp, Pilgrimage, World	
1.Certification from Sponsoring Organization	Sponsoring Organization
2. Affidavit of Undertaking of Companion indicating safety measures undertaken by the School, Sports Agency, or Organization	
3. Signed Invitation from the Sponsoring Agency/Organization abroad with itinerary of travel and list of participants and duration of the	









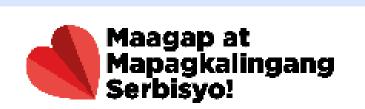






WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE	
Minors going Abroad for Medical Purposes		
1. Medical Abstract of the Minor (1 Original Copy)	Attending Physician	
2. Recommendation from the Attending Physician that such medical procedure is not available in the country (if applicable)		
3. Letter from the Sponsor (if applicable)	Sponsoring Person	
Minors going Abroad with pending petition	for Inter-Country or Domestic Adoption	
1. Placement Authority issued by NACC-RACCO	National Authority for Child Care (NACC)	
2. Consent to Travel issued by NACC-RACCO	National Authority for Child Care (NACC)	
3. Notarized Affidavit of Undertaking from the Prospective Adoptive Parent/s (1 Original)	Applicant	
4. Court Order (for those with Pending Court Petition)	RTC who has jurisdiction over the case	
5. Placement Authority issued by NACC-RACCO	National Authority for Child Care (NACC)	
Minors under Foster Care		
1. Notarized Affidavit of Undertaking by the Foster Parent/s	Foster Parent/s	
2. Consent to Travel issued by NACC-RACCO	National Authority for Child Care (NACC)	
Minors under Legal Guardianship who will be unaccompanied by their Legal Guardian		
1. Court Order on Legal Guardianship (1 Certified True Copy)	Court	
For Minors whose parents are Seafarers		
1. Certification from the Manning Agency attesting that the parent/s is on board employment (1 Original or 1 Electronic Copy)	Applicant	
2. Seaman's Book of Parent/s (1 Photocopy)	Applicant	
3. Parent/s Written Consent (1 Electronic Copy)	Applicant	

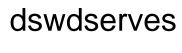
















WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE
For Minors with alleged missing parent/s	
1. Social Case Study Report from the LSWDO where the alleged missing parent's last known address (1 Original)	
2. Blotter Report from either local police or Barangay Certification from the Locality of the last known address of the alleged missing parent (1 Original)	of the alleged missing parent/s last known
3. Returned registered mail to the last known address of the alleged missing parent/s known address (1 Original, if available)	

IV. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Register information	None	5 minutes	Divine Grace R. Lecias Social Welfare Officer II
in MTA client's logbook 2. Fill out and Submit Accomplished Application Form and Documentary Requirements for Screening	None	50 minutes	Divine Grace R. Lecias Social Welfare Officer II
3. Pay the prescribed amount and receives the Official Receipt	Php300.00 for 1 year validity; Php600.00 for 2 years validity	10 minutes	Divine Grace R. Lecias Social Welfare Officer II
4. Present the Official Receipt and Receives the issued Travel Clearance	None	30 minutes	Divine Grace R. Lecias Social Welfare Officer II
5. Receive the Travel Clearance/Certificate of Exemption and Signs the Logbook	None	5 minutes	Divine Grace R. Lecias Social Welfare Officer II
6. Accomplish and Submit the Client Satisfaction Measurement Form (CSMF)	None	5 minutes	Divine Grace R. Lecias Social Welfare Officer II

V. PROCESSING TIME

1 hour and 40 minutes



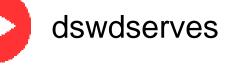




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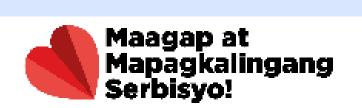




VI. FEEDBACKS AND COMPLAINTS MECHANISM

How to send feedback	Client Satisfaction Measurement Form is administered to clients who availed the service. This survey measures the client's satisfaction in the delivery of service. Feedback can also be sent through mta.fo7@dswd.gov.ph or proserv.fo7@dswd.gov.ph
How feedbacks are processed	The Minors Travelling Abroad Focal Person or Officer In-charge verifies the nature of feedback or queries received through Client Satisfaction Measurement Form or official e-mail address within three (3) working days upon receipt. The client will be notified through phone call or e-mail on the appropriate actions taken.
How to file a complaint	To file a complaint against Minors Travelling Abroad, provide the following details: Full name and address of the complainant Narrative of the complaint Evidences Name of the person being complained Contact Number Send all complaints to: Director Shalaine Marie S. Lucero DSWD Field Office VII MJ Cuenco Corner Gen. Maxilom Ave. Carreta, Cebu City Or email at ord.fo7@dswd.gov.ph Complaints with incomplete details as indicated above shall not be entertained.
Complainant using 8888	SMS will receive the complaint and will be forwarded to PMB if the concern is: On Programs and Services- SPD will be the one replying to the complaint On Personnel and other outside matters- The Focal Person will be the one replying to the complaint

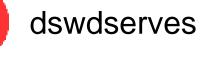
















VI. FEEDBACKS AND COMPLAINTS MECHANISM

How complaints are processed

All complaints received against the Minors Travelling

Abroad will be processed by the Grievance Committee of the Field Office. The Committee evaluates and determines the complaints received

on a weekly basis. The Committee shall coordinate

with the Minors Travelling Abroad Focal or

Officer In-

Charge to address the complaints. An

investigation

shall be held if deemed necessary.

An incident report on the result of the investigation

and action taken will be prepared by the Grievance

Committee and will be submitted to the Regional Director for appropriate action.

A response letter or feedback report addressed to

the complainant will be prepared by the Committee

for the appropriate action.

All complaints will be responded in accordance

to the

Ease of Doing Business timeline. For follow-ups or queries, the contact information are

as follows:

Telephone No: (032) 233-0261 Email: fo7@dswd.gov.ph

Contact info of ARTA, PCC and CCB

Tel No. 8847-5093

Email Add: complaints@arta.gov.ph

Hotline: 8888

Email Add: pcc@malacanang.gov.ph

Contact Center ng Bayan (CCB)

email@contactcenterngbayan.gov.ph

www.dswd.gov.ph

0908-881-6565









