

SAMPLE DOCS



DEPARTMENT OF
TRADE & INDUSTRY
PHILIPPINES

This certifies that

is a business name registered in this office pursuant to the provisions of Act 3883, as amended by Act 4147 and Republic Act No. 863, and in compliance with the applicable rules and regulations

prescribed by the Department of Trade and Industry.

This certificate issued to

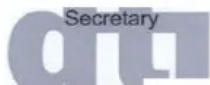
is valid from 9 February 2013 to 9 February 2020 subject to continuing compliance with the above-mentioned laws and all applicable laws of the Philippines, unless voluntarily cancelled.

In testimony whereof, I hereby sign this

Certificate of Business Name Registration

and issue the same on this 9th day of February 2013 in the Philippines.

GREGORY L. DOMINGO

Secretary


Certificate No.

This certificate is not a license to engage in any kind of business and valid only

P HRN 6887675ES



Republic of the Philippines
Province of Albay
Municipality of Sto. Domingo

Barangay San Vicente

OFFICE OF THE BARANGAY CAPTAIN

BARANGAY CLEARANCE

TO WHOM IT MAY CONCERN:

This is to certify that _____, _____ years old,
_____ and a resident of Barangay San Vicente, Sto. Domingo, Albay is known to be of good moral
character and law-abiding citizen in the community.

To certify further, that he/she has no derogatory and/or criminal records filed in this barangay.

ISSUED this _____ day of _____, 2014 at Barangay San Vicente, Sto.
Domingo, Albay upon request of the interested party for whatever legal purposes it may serve.

JOEL B. LLORCA
Barangay Captain

O.R No. _____
Date Issued: _____
Doc. Stamp: Paid



Republic of the Philippines
Province of Zamboanga del Sur
MUNICIPALITY OF PITOGO

OFFICE OF THE MUNICIPAL MAYOR

BUSINESS PERMIT 2019

NO. _____

Is _____ hereby granted to
of _____, Pitogo, Zamboanga del Sur,
to operate the business of _____, upon
payment of the required license fee (s) (Quarterly /
Semi-Annually / Annually), revoked or cancelled
for cause.

This PERMIT, together with the official
receipt/s shall be displayed in a conspicuous place
of business.

Issued this _____ day of _____
Municipal Hall, Pitogo Zamboanga del Sur,
Philippines.

PAID UNDER O.R. # _____

DATE ISSUED: _____

EXPIRY DATE: _____

ENGR. JAMES L. YECYEC
Municipal Mayor



REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF FINANCE
BUREAU OF INTERNAL REVENUE

TIN:

BIRTH DATE:

ISSUE DATE:

SIGNATURE



COURSE REGISTRATION FORM

Date Applied

PERSONAL DATA

FIRST NAME M.L. LAST NAME

(Select One)

PROFESSIONAL BACKGROUND

Company Name

Company Address

Department/Division

Date of Employment (01 August 2018)

Industry

Position

Telephone No.

Facsimile

** For QPRA Applicants Only

Length of Experience as company Regulatory Affairs Officer (Select One)

Company Name

Company Address

Name of Contact Person

Email

Facsimile

Cellphone No.

Telephone No.

For more than one company please include it in the body of the email following the above format

TYPE OF COURSE (please select a training course)

(Select One)

TERMS AND CONDITIONS

1. Registration fee is non-refundable.
2. Changing of date is allowed once only for the same paid course. Notify and e-mail a formal letter of request addressed to the FDA Academy containing the following in the SUBJECT field: REQUEST/Name of the registered participant/Date of confirmed schedule/Control Code (TC) at least seven (7) working days prior to the commencement of the course. One office will re-schedule contingent on the next available date.
3. Transferring or changing of participant is also allowed once only for the same paid course. Notify and e-mail a formal letter of request addressed to the FDA Academy containing the following in the SUBJECT field: TRANSFER/Name of the registered participant/Date of confirmed schedule/Control Code (TC) and the Name of the applicant and attach the requestative e-mail FDA Memorandum Circular 2013-096 GUIDELINES ON ELECTRONIC REGISTRATIONS FOR TRAINING AND SEMINARS (E-REGISTRATION) at least seven (7) working days prior to the commencement of the course. One office will process the request upon approval of your application.
4. Absence/late presence/before 0900 am for the registration. Course will start at exactly 0900 am. Late comers will not be accepted and their registration fee will be automatically forfeited.
5. Absence/late appearance during the confirmed training course automatically forfeits the registration fee.
6. AGREEMENT FORM has a five (5) working-day validity once sent. Failure to pay within 3 working days will automatically cancel the application and a new registration form must be submitted.
7. Completed training registration form shall be emailed to: regaffairs@fda.gov.ph or regaffairs@fda.gov.ph following the prescribed format from GUIDELINES ON ELECTRONIC REGISTRATIONS FOR TRAINING AND SEMINARS.
8. This reserves the right to cancel or re-schedule courses within three (3) day notice. In the event of cancellation, all pre-paid fees will automatically move towards the next available course.
9. Bring a copy of the confirmation slip on the details of the training course. A confirmation slip is required for attendance and release of certificates.

☐ I understand that by selecting this checkbox, I have read and accepted the terms and conditions stated on this form.

NOTE: All fields are mandatory. Do not leave any blank spaces put N/A if not applicable.
For any other concerns please do not hesitate to email regaffairs@fda.gov.ph or call 077-0079.