



APPLICATION FOR REGISTRATION (FEDERATION/NATIONAL UNION)

PART I. INFORMATION ABOUT THE REPORTING ORGANIZATION

To be accomplished by the applicant. Supply all required information. Misrepresentation, false statement or fraud in this application or any supporting document is a ground for denial or cancellation of registration.

Date Accomplished (mm/dd/yyyy)

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Name of Applicant Organization

Address

Contact Nos.

E-mail: _____

Landline No: _____

Mobile No: _____

Name of President

(Last Name)

(First Name)

(M.I.)

Address

Contact Nos.

E-mail: _____

Landline No: _____

Mobile No: _____

Gender

Male

Female

Date Organized(mm/dd/yyyy)

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(if ratification was done on successive dates, state the dates of ratification)

Date of CBL Ratification (mm/dd/yyyy)

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List of Locals <small>(Use additional sheet/s if necessary)</small>	Addresses	Industry Classification <small>(Please refer to PSIC at the BLR / LRD)</small>	No. of Members	Bargaining Status	
				With CBA <small>(State duration)</small>	Certified / Recognized Bargaining Agent as of
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

The abovenamed locals/affiliates (including, if any, those named in Annex "A" of this application) are not locals/affiliates of other federations/national unions, or have ceased to be locals/affiliates thereof.

I attest to the truth of the foregoing.

 President or Authorized Representative
 (Signature over printed name)

Subscribed and sworn to before me at _____, Philippines,
 this _____ day of _____ 20 _____ with I.D. No. _____
 issued by _____ on _____.

NOTARY PUBLIC

Doc. No. _____
 Page No. _____
 Book No. _____
 Series of _____

EVALUATION FORM WITH CHECKLIST
(FEDERATION/NATIONAL UNION)

Date Received(mm/dd/yyyy)

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FOR PROCESSOR'S USE ONLY.

A. CHECKLIST. ALL DOCUMENTS MUST BE CERTIFIED BY THE SECRETARY OR TREASURER AND ATTESTED TO BY THE PRESIDENT OF THE LABOR ORGANIZATION. DOCUMENTS NOT SO CERTIFIED AND ATTESTED SHALL NOT BE ACCEPTED.

Duly accomplished application form shall be accompanied by the original copy and two (2) duplicate original copies of the following documents (Section 3 Rule IV of D.O. 40-03, as amended):

- 1. Duly filled-up Application Form
- 2. Names of the organization's officers and their addresses
- 3. Minutes of the organizational meeting/s
- 4. List of members who participated in the organizational meeting/s
- 5. Financial reports, if applicant organization has been in existence for one year or more
- 6. Certification on non-collection of dues or financial report if applicant organization has been in existence for less than one year
- 7. Constitution and By-laws
- 8. Minutes of adoption or ratification of the CBL and dates of ratification (*Minutes of adoption or ratification is not required if it is done simultaneously with the organizational meeting and the same is reflected in the minutes of the organizational meeting*)
- 9. List of members who participated in the ratification of CBL
- 10. Resolution of the affiliation of at least ten (10) locals/chapters/affiliates (each must be the duly recognized orcertified bargaining representative in the establishment).
- 11. Names and addresses of the companies where the locals/chapters/ affiliates operate and the list of all the membersin each company.

B. PAYMENT OF REGISTRATION FEE

- Registration Fee paid under O.R. No. _____ Date _____
- Registration Fee not paid

C. RECOMMENDATION ON THE APPLICATION:

- Recommending Approval with Certificate of Registration attached
- Recommending Denial due to failure to comply with documentary requirements (refer to BLR Form No.2-1 CL-FED-mm/yy/seq)

By: _____
Processor
(Signature over printed name)

Date: _____

ACTION ON THE APPLICATION

A. APPROVAL / DENIAL

- Approved for Registration, with duly signed Certificate of Registration attached
- Registration denied, with duly signed Notice of Denial

Respectfully endorsed to the Director

- For attestation of the Certificate of Registration
- For notation of Notice of Denial

_____	_____
Division Chief	Date

Approved for release.

_____	_____
Director	Date

Registration Certificate No.	Date Issued:	Date Released:
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