



Republic of the Philippines
 DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS
 Office of the Secretary
 Port Area, Manila

**ACCREDITATION FORM
 For Civil Society Organizations**

Name of the organization / entity	
Mailing Address	
Telephone number(s)	
Fax Number(s)	
E-mail	
Website	
Year established	
Brief summary of the purpose and the activities of your organization / entity	
Total number of members and geographical distribution, if applicable	
Please check not more than two (2) desired interest of participation	<input type="checkbox"/> Project identification <input type="checkbox"/> Project preparation <input type="checkbox"/> Budgeting <input type="checkbox"/> Procurement <input type="checkbox"/> Project implementation <input type="checkbox"/> Project operation <input type="checkbox"/> Post project evaluation <input type="checkbox"/> Others, please specify _____
Programs and activities in areas relevant to good governance, infrastructure development, and other related activities	

To complete your application for accreditation, attached copy of the following documents:

1. Copy of Securities and Exchange Commission registration;
2. Copy of charter or constitution and by-laws and any other document that may explain the organization's purpose, aims, and initiatives;
3. Proof of interest in good governance, infrastructure development and other related activities, i.e. reports, press releases, news clippings, newsletters and other periodicals;
4. Should the applicant be a network, or similar member entity, a description of the membership system, indicating the total number of members, the type of their geographical distribution;
5. Other documents that may be deemed necessary.

Information concerning the contact person:

Surname _____ First Name _____ Middle Name _____
Position: _____

Phone : _____ Fax : _____ E-mail : _____

Information concerning the contact person:

Surname _____ First Name _____ Middle Name _____
Position: _____

Phone : _____ Fax : _____ E-mail : _____

Review and sign this statement:

I confirm that the above information is true and complete. I understand that my organizations / entity's application is subject to review and approval by the DPWH Secretary. Accreditation of Civil Society Organizations in the DPWH does not imply financial support for my participation.

Signature: _____
Name: _____
Title/Position: _____
Date: _____

Please send the filled-out form together with the copies of the documents required above to the following mailing address:

STAKEHOLDERS MANAGEMENT SECTION
Stakeholders Relations Service
Department of Public Works and Highways
Bonifacio Drive, Port Area, Manila 1018

or send the filled-out form and the required copies of the documents thru e-mail:

dpwh_feedback@yahoo.com
dpwh_csodesk@yahoo.com

Thank you for applying for accreditation!