

FOI Tracking Number:

FREEDOM OF INFORMATION REQUEST FORM

(Pursuant to Executive Order No. 2,s. 2016) (as of November 2016)

Please read the following information carefully before proceeding with your application. Use blue or black ink. Write neatly and in BLOCK letters. Improper or incorrectly-filled out forms will not be acted upon. Tick or mark boxes with "X" where necessary. Note: (◀) denotes a MANDATORY field.

| A. Requesting Party | |
|--|---|
| | and address for correspondence. Additional contact details will correspond with you in the manner you prefer. |
| 1. Title (e.g. Mr, Mrs, Ms, Miss) 2. | Given Name/s (including M.I) 3. Surname |
| 4. Complete Address (Apt/House Num | ber, Street, City/Municipality, Province) |
| 5. Landline/Fax 6. | Mobile 7. Email ■ |
| 8. Preferred Mode of Communicatio | n □ Landline □ Mobile Number □ Email □ Postal Address (If your request is successful, we will be sending the documents to you in this manner.) |
| 9. Preferred Mode of Reply | ☐ Email ☐ Fax ☐ Postal Address ☐ Pick-Up at Agency |
| 10. Type of ID Given (Please ensure your IDs contain your photo and signature) | ☐ Passport ☐ Driver's License ☐ SSS ID ☐ Postal ID ☐ Voter's ID☐ ☐ School ID ☐ Company ID ☐ Others |
| B. Requested Information | |
| 11. Agency - Connecting Agency (if applicable) | ▲ |
| 12. Title of Document/Record Requested (Please be as detailed as possible) | ◀ |
| 13. Date or Period (DD/MM/YY) | |
| 14. Purpose | ▲ |
| | |
| 15. Document Type | 4 |
| 16. Reference Numbers (if known) | ▲ |
| 17. Any other Relevant Information | |

C. Declaration

Privacy Notice: Once deemed valid, your information from your application will be used by the agency you have applied to, to deal with your application as set out in the Freedom of Information Executive Order No. 2. If the Department or Agency gives you access to a document, and if the document contains no personal information about you, the document will be published online in the Department's or Agency's disclosure log, along with your name and the date you applied, and, if another person, company or body will use or benefit from the documents sought, the name of that person, entity or body.

I declare that:

- The information provided in the form is complete and correct;
- I have read the Privacy notice;
- I have presented at least one (1) government-issued ID to establish proof of my identity

I understand that it is an offense to give misleading information about my identity, and that doing so may result in a decision to refuse to process my application.

| Signature | ◀ |
|---|---|
| Date Accomplished (DD/MM/YYYY) | 4 |
| D. FOI Receiving Officer [INTER | NAL USE ONLY] |
| Name (Print name) | ▲ |
| Agency - Connecting Agency (if applicable, otherwise N/A) | ▲ |
| Date entered on eFOI (if applicable, otherwise N/A) | ◀ |
| Proof of ID Presented (Photocopies of original should be attached) | ☐ Passport ☐ Driver's License ☐ SSS ID ☐ Postal ID ☐ Voter's ID☐ School ID ☐ Company ID ☐ Others |
| The request is recommended to be: If Denied, please tick the Reason for the Denial | ☐ Approved ☐ Denied ☐ Invalid Request ☐ Incomplete ☐ Data already available online |
| | |
| Second Receiving Officer Assigned (print name) | |
| | ◀ |
| (print name) Decision Maker Assigned to | ■ Successful □ Partially Successful □ Denied □ Cost |
| (print name) Decision Maker Assigned to Application (print name) | ■ Successful □ Partially Successful □ Denied □ Cost □ Invalid Request □ Incomplete □ Data already available online □ Exception Which Exception? |
| (print name) Decision Maker Assigned to Application (print name) Decision on Application If Denied, please tick the Reason for the | ☐ Invalid Request ☐ Incomplete ☐ Data already available online ☐ Exception Which Exception? |
| (print name) Decision Maker Assigned to Application (print name) Decision on Application If Denied, please tick the Reason for the Denial | ☐ Invalid Request ☐ Incomplete ☐ Data already available online ☐ Exception Which Exception? |
| (print name) Decision Maker Assigned to Application (print name) Decision on Application If Denied, please tick the Reason for the Denial Date Request Finished (DD/MM/YYYY) Date Documents (if any) Sent | ☐ Invalid Request ☐ Incomplete ☐ Data already available online ☐ Exception Which Exception? |
| (print name) Decision Maker Assigned to Application (print name) Decision on Application If Denied, please tick the Reason for the Denial Date Request Finished (DD/MM/YYYY) Date Documents (if any) Sent (DD/MM/YYYY) | ☐ Invalid Request ☐ Incomplete ☐ Data already available online ☐ Exception ☐ Which Exception? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ |