

# City Social Welfare and Development Office External Services



### 1. Conduct of Pre-Marriage Counselling

Pre-Marriage Counselling is one of the requirements in order to apply for the Marriage Certificate that can be availed of at our Civil Registry Office.

Office or Division:	City Social Welfare a (RHU), Local Civil Re			
Classification:	Simple			
Type of	G2C – Government	to Citizen		
Transaction:				
Who may avail:	Any couple who wish	es to get ma		
	REQUIREMENTS		WHERE TO SE	
Birth Certificate				Statistics Authority
Certified True Copy	/)	(PSA) or Lo	cal Civil Registra	ar of Place of Birth
	venty-five (25) years	old and fem	ale is below two	enty-one (21)
years old:				
	l consent (1 Original		parent or legal of	guardian of the
Copy)		applicant/s From either parent or legal guardian of the		
2. Valid I.D. (1 Orig	inal Copy, 1		parent or legal (	guardian of the
Photocopy)	1051101/	applicant/	DD 00500W	DEDOON
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Fill up	1. Assist client on	None	20 minutes	Staff
registration,	Registration and	None	20 minutes	POPCOM Office
attendance, and	proper fill up of			Or
marriage couple	form			CHO-RHU
expectation form	TOTTI			Or
oxpodiation form				Social Worker
				CSWDO
2. Attend Pre	2. Conduct	None	4 hours	Staff
marriage	orientation			POPCOM Office
Orientation				Or
				CHO-RHU
				Or
				Social Worker
				CSWDO
3. Claim	Issue certificate	None	5 minutes	Staff
Certificate of	of attendance/			POPCOM Office
Attendance /	participation			Or
Participation				CHO-RHU
				Or
				Social Worker
				CSWDO
	TOTAL:	None	4 Hours and	

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25 Minutes





### 2. Counselling on Child Rearing / Parenting Effectiveness

Counselling Service for Parents and/or guardians having difficulties with child rearing.

Office or Division:	City Social Welfare a	ınd Developn	nent Office	
Classification:	Simple			
Type of	G2C – Government t	o Citizen		
Transaction:				
Who may avail:		s who are rai		
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE
1. I.D. of Parent or Photocopy)	Guardian (1	Client		
Birth Certificate of Photocopy)	of Child/Children (1	Client		
<ol><li>Accomplished In Original Copy)</li></ol>	take Form (1	City Social (CSWDO)	Welfare and Dev	velopment Office
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Walk into the office.	Endorse client to social worker.	None	5 minutes	Social Worker CSWDO
2. Engage in counseling session	2. Conduct counselling session and follow up activities as needed (e.g. schedule next session/s)	None	30 minutes	Social Worker CSWDO
	TOTAL:	None	35 Minutes	





### 3. Complaints on Child Support or Custody

Assistance to either parent/guardian who is deprived of support or custody by the other parent / guardian of a child.

other parent / guardia	an of a child.			
Office or Division:	City Social Welfare a	ınd Developn	nent Office	
Classification:	Complex			
Type of Transaction:	G2C – Government t	o Citizen		
Who may avail:	Parents or Guardians	s who are rai	sing children	
CHECKLIST OF	REQUIREMENTS		KLIST OF REQ	UIREMENTS
1. I.D. of Parent or Copy, 1 Photocopy)	Guardian (1 Original	Client		
2. Birth Certificate of Photocopy)	f Child/Children (1	Client		
Accomplished Into Original Copy)	ake Form (1	City Social (CSWDO)	Welfare and Dev	relopment Office
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Fill-out intake sheet.	Provide intake sheet	None	5 minutes	Social Worker CSWDO
2. Voice out complaint.	2. Listen to complaint and assess case	None	15 minutes	Social Worker CSWDO
3. Set date when a case conference will be conducted with the complained party (if residing within San Pedro).  *If complained is residing outside of San Pedro, refer	3. Issue invitation for the complained party.	None	5 minutes	Social Worker CSWDO
client to Local Government Unit of residence of complained.  4. Hand over the invitation to the Office of Barangay	None	None	30 minutes	Barangay of Residence of Complained Party
of residence complained 5. Attend	5. Conduct case	None	1 hour	Registered Social

conference. Put in writing

agreements (if any) or give

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scheduled case

conference.

Worker of the

Office Handling

the case CSWDO





referral to PAO or certification of proceedings if no agreement was made between the two.			
TOTAL:	None	1 Hour and 55 Minutes	



### 4. Financial Assistance (for Medical, Burial and other Financial concerns) - Below Php 5,000.00 grants

Financial Assistance is granted for various purposes, such as medical, burial, and other financial concerns. This process explains particularly grants that are amounted below Php 5,000.00

Office or Division:	Office of the Mayor/	CSWDO		
Classification:	Simple			
Type of	G2C – Government	to Citizen		
Transaction:	G2C - Government	to Citizen		
Who may avail:	Residents of the Cit	v of San Ped	ro	
	REQUIREMENTS	ly or Garri cu	WHERE TO SE	CURE
Letter Request (1 Receiving Copy)		Client	WILKE TO GE	
Certificate of Indi     Copy)		Respective	Barangay	
3. Voter's Certificati Certified True Copy patient/deceased at Verification of COM Record at Barangay Indigency	each for nd claimant) OR ELEC of Voter's	COMELEC		
4. Valid I.D. (1 Phot		Client		
patient/deceased ar For medical assist				
1. Medical Abstract		Client's Des	tor, Clinic, or ho	anital
(1 Original or 1 Cert		Client's Doc	tor, Clinic, or no	spitai
2. Supporting Docu		Client's Doc	tor, Clinic, or ho	enital
medical needs (pre		Olichi 3 Doc	itor, Olimio, or mo	opital
request, operation of				
bill) (1 Photcopy)	quotation, noopital			
For burial assistar	ice.			
1. Funeral Contract Certified True Copy	(1 Original or 1	Funeral Par	lor	
Death Certificate     Certified True Copy	(1 Original or 1	passed awa		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLI
1. Submit a request	1. Review the	None	2 minutes	Staff
letter addressed to the City Mayor with	completeness of the requirements			CSWDO
all the pertinent documents attached, to the City Social Welfare and Development Office.	1.1 Conduct interview and further assessment to the	None	3 minutes	Staff CSWDO





1.2 Encode the application and start the preparation of the case study.	None	5 minutes	Staff CSWDO
1.3 Sign the case study.	None	3 minutes	City Government Department Head I
			CSWDO
1.4 Forward the case study to the Office of the Mayor for approval.	None	2 minutes	Staff CSWDO
1.5 Check, receive and encode the Financial, Medical or Burial Assistance and endorse to the City Mayor for approval.	None	5 minutes	Clerk City Mayor's Office
1.6 Review, approve and indicate the amount of financial assistance to be given.	None	1 day	City Mayor City Mayor's Office
1.7 Encode the approved Financial Assistance and prepare the revolving fund voucher.	None	5 minutes	Clerk City Mayor's Office
1.8 Schedule the release of Financial Assistance. A message will be sent to the client for the schedule.	None	5 minutes	Clerk City Mayor's Office



2. Proceed to the Office of the Mayor to receive the financial assistance based on the given schedule.	2. Release the amount to the client upon presentation of a valid I.D.	None	5 minutes	Staff City Mayor's Office
	TOTAL:	None	1 Day and 37 Minutes	

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### 5. Financial Assistance (for Medical, Burial and Other Financial Concerns) – Php 5,000.00 and above grants

Financial Assistance is granted for various purposes, such as medical, burial, and other financial concerns. This process explains particularly grants that are amounted Php 5,000.00 and above.

Office or Division:	Office of the Mayor/	CSWDO		
Classification:	Simple			
Type of	G2C - Government	to Citizen		
Transaction:				
Who may avail:	Residents of the Cit	y of San Ped	Iro	
CHECKLIST OF F	REQUIREMENTS		WHERE TO SE	CURE
1. Letter Request (1	Original Copy, 1	Client		
Receiving Copy)				
2. Certificate of Indig	ency (1 Original	Respective	Barangay	
Copy)				
3. Voter's Certification	n (1 Original or	COMELEC		
Certified True Copy				
patient/deceased and				
Verification of COME				
Record at Barangay	Certificate of			
Indigency				
4. Valid I.D. (1 Photo		Client		
patient/deceased and				
For medical assista				
<ol> <li>Medical Abstract/N</li> </ol>		Client's Doc	ctor, Clinic, or ho	spital
(1 Original or 1 Certif				
<ol><li>Supporting Docum</li></ol>		Client's Doc	ctor, Clinic, or ho	spital
medical needs (pres				
request, operation qu	uotation, hospital			
bill) (1 Photcopy)				
For burial assistance				
<ol> <li>Funeral Contract (</li> </ol>	1 Original or 1	Funeral Par	·lor	
Certified True Copy)				
2. Death Certificate (	1 Original or 1	City Civil Registrar where the deceased		
Certified True Copy)		passed away		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Submit a	1. Review the	None	2 minutes	Staff
request letter	completeness of			CSWDO
addressed to the	the requirements			
City Mayor with all				
the pertinent	1.1 Conduct	None	3 minutes	Staff
documents	interview and			CSWDO
attached, to the	further	E BO		
City Social Welfare	assessment to the			
and Development	requestor.			





			MA, PH	
Office.	1.2 Encode the application and	None	5 minutes	Staff CSWDO
	start the preparation of the case study.			36,126
	1.3 Sign the case study.	None	3 minutes	City Government Department Head
				CSWDO
	1.4 Forward the case study to the Office of the Mayor for approval.	None	2 minutes	Staff CSWDO
	1.5 Check, receive and encode the Financial, Medical	None	5 minutes	Clerk City Mayor's Office
	or Burial Assistance and endorse to the City Mayor for approval.			
	1.6 Review, approve and indicate the amount of financial assistance to be given.	None	1 day	City Mayor City Mayor's Office
	1.7 Encode the approved Financial Assistance and forward to the City Budget Office for Obligation Request (OBRe) preparation.	None	3 minutes	Clerk City Mayor's Office
(0)	1.8 Prepare the OBRe and forward the same	None	5 minutes	Staff City Budget Office





to the LCE/Executive Assistant IV for signature.			
1.9 Sign the OBRe, and forward to the City Budget Office for signature.	None	1 day	City Mayor Or Executive Assistant IV City Mayor's Office
1.10 Forward signed OBRe with all the attached documents to the City Accounting Office for checking and preparation of the Disbursement Voucher (DV).	None	1 day	City Government Department Head I City Budget Office
1.11 Forward signed DV to the City Treasurer's Office for encoding and check preparation, have the DV and check signed by the City Treasurer, for forwarding to the Mayor's Office for signature.	None	1 day	Staff City Accounting Office
1.12 Sign the DV and checks of the financial assistance.	None	1 day	City Mayor Or Executive Assistant IV City Mayor's Office
1.13 Forward the signed checks to the City Accounting Office for advice.	None	3 minutes	Staff City Mayor's Office
1.14 Forward the advised check to the City Treasury	None	5 minutes	Staff City Accounting Office



	Office for encoding and release.			
2. Proceed to the City Treasurer's Office to receive the check and present a valid I.D.	2. Release the check to the client.	None	5 minutes	Staff City Treasury Office
	TOTAL:	None	5 Days and 41 Minutes	



#### 6. Issuance of Solo Parent ID

Solo Parents who are residing at the City of San Pedro can claim a Solo Parent I.D. and enjoy the benefits as stipulated in the "Solo Parents' Welfare Act of 2000".

Office or Division: City Social Welfare and Development Office Division:	ce
Classification: Simple	
Type of G2C – Government to Citizen	
Transaction:	
Who may avail: Qualified solo parents residing at San Ped	
CHECKLIST OF REQUIREMENTS WHERE	TO SECURE
1. Barangay Certification of being a Barangay of residence	e of applicant
Solo Parent (1 Original Copy)  2. Affidavit of being a Solo Parent (1 Legal Office of choice	of Applicant
Original Copy)	e or Applicant
3. Child/ren's Birth Certificate (1 Philippine Statistics A	Authority (any outlet) or
	of place of child's birth
4. 1x1 I.D. Picture (2 Original Copies) Client	
Accomplished Application Form (1	
Original Copy)	
If spouse is deceased:	
	of place of spouse's death
If employed:	
	ffice where the applicant
Copy) works	
CLIENT STEPS AGENCY FEES TO PROCES ACTIONS BE PAID G TIME	
1. Sign in the log 1. Give queueing None 15 minu	
book and wait for number	CSWDO
your queuing	
number to be	
called	
called.	
2. Submit the 2. Check the None 30 minu	utes Staff
2. Submit the requirements to 2. Check the submitted None 30 minutes	utes Staff CSWDO
2. Submit the requirements to the CSWDO Staff. 2. Check the submitted requirements and	
2. Submit the requirements to the CSWDO Staff.  2. Check the submitted requirements and give client the	
2. Submit the requirements to the CSWDO Staff.  2. Check the submitted requirements and give client the contact number to	
2. Submit the requirements to the CSWDO Staff.  2. Check the submitted requirements and give client the contact number to follow-up the	
2. Submit the requirements to the CSWDO Staff.  2. Check the submitted requirements and give client the contact number to	
2. Submit the requirements to the CSWDO Staff.  2. Check the submitted requirements and give client the contact number to follow-up the	
2. Submit the requirements to the CSWDO Staff.  2. Check the submitted requirements and give client the contact number to follow-up the status of the request.	CSWDO
2. Submit the requirements to the CSWDO Staff.  2. Check the submitted requirements and give client the contact number to follow-up the status of the request.  2. Check the submitted requirements and give client the contact number to follow-up the status of the request.	CSWDO  utes Staff
2. Submit the requirements to the CSWDO Staff.  2. Check the submitted requirements and give client the contact number to follow-up the status of the request.  2. Prepare Solo Parent I.D. and	CSWDO
2. Submit the requirements to the CSWDO Staff.  2. Check the submitted requirements and give client the contact number to follow-up the status of the request.  2. Check the submitted requirements and give client the contact number to follow-up the status of the request.  2.1 Prepare Solo Parent I.D. and encode it to the	CSWDO  utes Staff
2. Submit the requirements to the CSWDO Staff.  2. Check the submitted requirements and give client the contact number to follow-up the status of the request.  2. Prepare Solo Parent I.D. and	CSWDO utes Staff
2. Submit the requirements to the CSWDO Staff.  2. Check the submitted requirements and give client the contact number to follow-up the status of the request.  2. Check the submitted requirements and give client the contact number to follow-up the status of the request.  2.1 Prepare Solo Parent I.D. and encode it to the	CSWDO  Ites Staff CSWDO



	TOTAL:	None	3 Days and 50 Minutes	
Parent I.D.	Parent I.D.			CSWDO
3. Claim Solo	3. Release Solo	None	10 minutes	Staff
	signature.			
	Head and City Mayor for			

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### 7. Case Management of Abuse Cases

Management of cases of abuse in the form of physical, sexual, emotional, psychological, etc.

Office or Division:	City Social Welfare and Development Office						
Classification:	Highly Technical						
Type of	G2B – Government to Business Entity, G2C – Government to						
Transaction:	Citizen, G2G - Gov	Citizen, G2G – Government to Government					
Who may avail:	Women and Childre	en Victims of	abuse who are r	esidents of San			
	Pedro City						
CHECKLIST OF I			WHERE TO SE	CURE			
<ol> <li>Accomplished Inta</li> </ol>	CSWDO						
Original Copy)							
For minors:							
1. Valid I.D. (1 Origin		Client					
2. Birth Certificate (1	Photocopy)	Philippine S	tatistics Authorit	y (Any outlet) or			
		Local Civil F					
CLIENT STEPS	AGENCY	FEES TO	PROCESSIN	PERSON			
4 10/1 11 1 1 11	ACTIONS	BE PAID	G TIME	RESPONSIBLE			
1. Walk into the	1. Assign client to	None	10 minutes	Staff			
office and log on	a registered social worker who will			CSWDO			
the logbook.							
2. Write on the	handle the case  2. Listen,	None	30 minutes	Social Worker			
intake sheet and	document, and	None	30 minutes	CSWDO			
orient the social	assess the case			OOVIDO			
worker of the	for appropriate						
abuse that	action while						
occurred.	maintaining						
000000.	confidentiality.						
3. Go to the	3. Accompany,	Psycholog	1 hour	Social Worker			
agency referred by	drop off, or refer	ical		CSWDO			
the social worker	the client if	evaluation					
for proper	needed:	– Php					
intervention or		5,000.00					
execute the	D. I	_					
intervention plan	PNP – WCPD for	10,000.00					
as agreed with the	Genitalia	(dependin					
Social Worker	Examination	g on the					
handling the case	(rape) and giving	case)					
	sworn statement,						
	and filing of case.						
	Amante Hospital:						
	Medico Legal						
	(physical abuse)	HIM					
	(1 ) 3 1 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3						
	Psychologist: For						



non – physical abuse cases (e.g. emotional, economic) Shelter Agencies – if the client needs to placed in a shelter agency (depending on the case)			
TOTAL:	Psycholog ical evaluation – Php 5,000.00 – 10,000.00 (dependin g on the case	1 Hour and 30 Minutes	





## 8. Case Management of Children at Risk (CAR) and/or Children in Conflict with the Law (CICL)

Management of Cases of Children at CAR and/or CICL.

Office or Division:	City Social Welfare and Development Office					
Classification:	Highly Technical					
Type of	G2B – Government	to Business	Entity, G2C - G	overnment to		
Transaction:		Citizen, G2G – Government to Government				
Who may avail:	CAR and/or CICL th	nemselves ar	nd their family, pa	arties who will refer		
	cases (e.g. Concerr	ned Citizen, E	Barangay, Police	e, etc.)		
CHECKLIST OF I	REQUIREMENTS		WHERE TO SE	CURE		
1. Referral letter (1 0	Original Copy)		eferring party (if r vernment office)	eferral is from		
Accomplished inta     Original Copy)		CSWDO				
3. 2x2 Photo (4 Orig	inal Copies)	From the re	eferring party, pa	rent, or guardian		
4. 2 pcs. long folder				rent, or guardian		
5. Valid I.D. of guard Photocopy for each)		From the re	eferring party, pa	rent, or guardian		
6. Certificate of live I Photocopy)	birth of child (1 From the referring party, parent, or guardia			rent, or guardian		
	n (15) years old and above:					
Filled-out discerning	ment evaluation (1	CSWDO				
Original Copy)						
CLIENT STEPS	AGENCY	FEES TO				
	ACTIONS	BE PAID	G TIME	RESPONSIBLE		
1. Walk into the	1. Refer client to	None	15 minutes	Staff		
office and write on	Social Worker			CSWDO		
the logbook	Handling CAR/					
O Orient sesial	CICL	Nana	20	Cooled Mortes		
2. Orient social	2. Document	None	30 minutes	Social Worker		
worker about the	complaint, assist			CSWDO		
case.	client, and assess					
	the case for					
	proper intervention, and					
	conduct					
	discernment					
	discerninent					
	avaluation for 15					
	evaluation for 15					
	years old and					
2 Co to the	years old and above child.	None	1 hour	Social Worker		
3. Go to the	years old and above child.  3. For petty cases	None	1 hour	Social Worker		
agency where	years old and above child. 3. For petty cases (e.g. theft, slight	None	1 hour	Social Worker CSWDO		
agency where referred by the	years old and above child.  3. For petty cases (e.g. theft, slight physical injury,	None	1 hour			
agency where referred by the social worker for	years old and above child.  3. For petty cases (e.g. theft, slight physical injury, etc.), a mediation	None	1 hour			
agency where referred by the	years old and above child.  3. For petty cases (e.g. theft, slight physical injury,	None	1 hour			





intervention plan as agreed with the Social Worker handling the case	CAR/CICL Family and complainant, monitoring by the Social Worker.			
	For heinous crimes: Client will be oriented of legal process, CICL will be subjected to legal proceedings and referred to a shelter agency.			
	TOTAL:	None	1 Hour and 45 Minutes	





### 9. Emergency Shelter Assistance

Moving victims to evacuation center during times of disaster.

Office or	City Social Welfare and Development Office				
Division:					
Classification:	Simple				
Type of	G2C – Government to Citizen				
Transaction:					
Who may avail: Indigent Citizens of San Pedro City who are in emergency					
	situations.				

CHECKLIST OF REQUIREMENTS

1. Incident Record (1 Original Copy)

2. Intake Sheet (1 Original Copy)

CSWDO (can be to follow)

<ol> <li>Incident Record (*)</li> </ol>	l Original Copy)	Bureau of F	ire Protection, B	arangay (to follow)
2. Intake Sheet (1 O	<ol><li>Intake Sheet (1 Original Copy)</li></ol>		an be to follow)	
CLIENT STEPS	AGENCY	FEES TO	PROCESSIN	PERSON
OLILINI OTLI O	ACTIONS	BE PAID	G TIME	RESPONSIBLE
<ol> <li>Be secured from</li> </ol>	<ol> <li>Conduct ocular</li> </ol>	None	1 hour	Staff
hazards	inspection,			CSWDO
	interview,			Or
	assessment if			BFP
	needed (or if			Or
	clients would			Barangay
	rather stay with			Personnel
	relatives)			Or
				CDRRMO
2. Be moved to	2. Assist to	None	1 hour	Staff
evacuation	relocate victims			CSWDO
center/s				Or
				BFP
				Or
				Barangay
				Personnel
				Or
				CDRRMO
	TOTAL:	None	2 Hours	





### 10. Emergency Financial Assistance

Financial assistance for victims of disasters especially during fire incidents

Office or	City Social Welfare and Development Office				
Division:					
Classification:	Complex				
Type of	G2C – Government to Citizen				
Transaction:					
Who may avail: Indigent Citizens of San Pedro City, Laguna who are in emerg					
	situations				

CHECKLIST OF REQUIREMENTS

1. Fire Incident Report (1 Original or 1 Certified True Copy)

2. Accomplished Intake Sheet (1 Original Copy)

CSWDO

Original Copy)					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
1. Submit the	<ol> <li>Assign client to</li> </ol>	None	30 minutes	Staff	
requirements to	an interviewer			CSWDO	
CSWDO and be	who will make a				
interviewed, then	social case study				
wait for the	report. Provide				
schedule of	contact Number to				
claiming	the client for				
	follow up, and submit the				
	documents to the				
	Office of the				
	Mayor for				
	processing.				
2. Claim the	2. Release the	None	5 minutes	Staff	
financial	financial			CSWDO	
assistance from	assistance.			Or	
the City Treasury				Staff	
Office and sign the				City Treasury	
payroll.				Office	
	TOTAL:	None	35 Minutes		



### 11. Request for Social Case Study Report

A social case study report contains summative information needed about a client that needs referral to any agency that can help augment the client's needs.

Office or	City Social Welfare and Development Office				
Division:					
Classification:	Simple				
Type of	G2C – Government to Citizen				
Transaction:					
Who may avail:	Clients seeking medical, burial, transportation, food and/or non-food				
	items, or educational financial assistance from other agencies.				

	items, or cadeations	a illianda assistance nom other agencies.
	CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
	1. Barangay Certificate of Indigency (1	Barangay Hall where client resides
	Original Copy)	
	Accomplished Intake Form (1)	CSWDO
	Original Copy)	
	3. Valid I.D. of Claimant and Beneficiary	Client
	(1 Photocopy)	
	4. Hospital Bill, Funeral Contract,	Doctor, Hospital, Clinic, Funeral Parlor, School
	Laboratory Request, Treatment	
	Quotation or Prescription, School billing	
	(Supporting document as to the need of	
	the patient or family of the deceased or	
	student) (1 Original Copy among them)	
For medical assistance:  1. Medical Certificate (1 Original Copy)  For burial assistance:		
		Hospital or Clinic
	1. Valid I.D. of the Deceased (1	Applicant
	Photocopy)	

Pnotocopy)					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
Submit the documentary requirements to CSWDO	Check     submitted     requirements, or     advise client if     there are lacking     or inaccurate     documents	None	5 minutes	Staff CSWDO	
2. Fill-out the application/intake form and submit it.	2. Give client application form. Assist in filling up as needed	None	10 minutes	Staff CSWDO	
3. Wait for the issuance of Social Case Study Report	3. Prepare Social Case Study Report and notify client when it can be claimed.	None	2 days	Staff CSWDO	



4. Claim Social Case Study Report	4. Issue Social Case Study Report	None	2 minutes	Staff CSWDO
	TOTAL:	None	2 Days and 17 Minutes	

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### 12. Request for Certificate of Indigency

A Certificate of Indigency is issued by the CSWDO certifying that the said client belongs to an indigent family in the City of San Pedro.

Office or Division:	City Social Welfare and Development Office			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizen			
Who may avail:	Clients seeking medical, burial, transportation, food and/or non food items or educational financial assistance from other agencies.			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Barangay Certificate of Indigency (1 Original Copy, for reference only, will be returned to the client)		Barangay Hall where client resides		
2. Valid I.D. of requesting client and his/her patient, deceased relative, student, or travelling companion (1 Photocopy, whichever is applicable)		Client		
3. Supporting documents as to the nature of the request (e.g. medical, burial, educational, transportation assistance, etc.) (1 Original Copy, for reference only, will be returned to the		Doctor, Hospital, Clinic, School, Funeral Parlor, Local Civil Registrar (whichever is applicable)		

client)				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Submit the documentary requirements to CSWD	1. Check requirements, advise client if there are lacking or inaccurate documents	None	5 minutes	Staff CSWDO
2. Wait for the issuance of Certificate of Indigency	2. Prepare Certificate of Indigency and notify client when it is available for claiming.	None	20 minutes	Staff CSWDO
3. Claim Certificate of Indigency	3. Issue Certificate of Indigency to client	None	2 minutes	Staff CSWDO
	TOTAL:	None	27 Minutes	



# City Social Welfare and Development - Office of the Senior Citizens Affairs

**External Services** 



### 1. Issuance of Senior Citizen ID and Purchase Booklet (DTI and Medicine)

Provision of Senior Citizen ID and Purchase booklet to Senior Citizens of San Pedro City, Laguna

Office or	Office of Senior Citizens Affairs				
Division:					
Classification:	Simple				
Type of	G2C				
Transaction:					
Who may avail:	Senior Citizens who are residents of the City				
CHECKLIST OF F		WHERE TO SECURE			
0 ,	Barangay Certificate of Residency (1)		Barangay Office where applicant resides		
	Original or 1 Certified True Copy)				
2. 1x1 I.D. Pictures (		Applicant			
3. Any of the following					
	✓ Birth Certificate;		statistics Authorit		
✓ National I.D.			Philippine Statistics Authority (any outlet)		
✓ Postal I.D.		Postal Office			
✓ COMELEC I.D.		COMELEC			
✓ Passport		Department of Foreign Affairs (DFA)			
✓ Driver's License		LTO			
4. Application Form (1 Original Copy)		CSWDO-OSCA			
If applicant has dual citizenship:		E	l		
5. Certificate of Allegiance (1 Certified True Copy)		Embassy where they are also a citizen			
6. Oath of Allegiance (1 Certified True		Embassy where they are also a citizen			
Copy)			ricic tricy are as	30 a citizeri	
CLIENT STEPS	AGENCY	FEES TO	PROCESSIN	PERSON	
CLIENT STEPS	ACTIONS	BE PAID	G TIME	RESPONSIBLE	
1. Submit complete	1. Check	None	10 minutes	Staff	
requirements and	correctness of			CSWDO-OSCA	
fill-out the	requirements.				
application form.	Give the client				
	contact number to				
	follow-up the ID				
	availability and				
submit the ID to					

None

None

10 Minutes

the OSCA staff.

2. Issue ID and

sheet.

purchase booklet

to client and log at the receiving log

2. Claim ID with

purchase booklet.





Provision of Lifetime PhilHealth Membership to qualified senior citizens of San Pedro City, Laguna.

r dard dity, Lagaria.				
Office or	Office of Senior Citizens Affairs			
Division:				
Classification:	Simple			
Type of	G2C			
Transaction:				
Who may avail:	Qualified senior citizens who are residents			
CHECKLIST OF I	REQUIREMENTS WHERE TO SECURE			
1. 1x1 I.D. Picture (1	1. 1x1 I.D. Picture (1 Original Copy) Applicant			
2. Senior I.D. (1 Photocopy)		Applicant		
3. Application Form	(1 Original Copy)	OSCA		
CLIENT STEPS	AGENCY	FEES TO	PROCESSIN	PERSON
CLIENT STEFS	ACTIONS	BE PAID	G TIME	RESPONSIBLE
1. Submit the	1. Assess	None	5 minutes	Staff
complete	requirements.			CSWDO-OSCA
requirements.	Give Client a			
	contact number			
	for follow up, and			
	submit papers to			
	PhilHealth.			0. "
2. Claim Philhealth	2. Issue the said	None	5 minutes	Staff
ID and	documents from			CSWDO-OSCA
Membership Data	Philhealth to client			
Record from				
OSCA				
TOTAL:		None	10 Minutes	

Staff

CSWDO-OSCA



### 3. Issuance of Senior Citizen Certification for Application and Cancellation

Provision of Senior Citizen Certification for any valid purposes and to those who will transfer from other cities/municipalities to Senior Citizens of San Pedro City,

Office or Division:	Office of the Senior Citizens Affairs  G2C			
Type of Transaction: Who may avail:	Simple Senior Citizens who are residents of the City			
CHECKLIST OF F			WHERE TO SE	CURE
1. Senior Citizen's ID	11 1 1 1 1			
For transfer:				
2. Senior Citizen's IE cities/municipalities	0011200001			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
Request for certification of application/other purposes/cancellation	1. Give a copy of the application form. Check completeness of presented document/s, advise the requestor to log on documents request log sheet, process the certification for validation and signature of OSCA head.	None	15 minutes	Staff CSWDO-OSCA
Total:		None	15 Minutes	



