# CITY SOCIAL WELFARE & DEVELOPMENT OFFICE

**External Services** 

### 1. Aid to Individuals in Crisis Situations

Issuance of Social Case Study Report and Certificate of Indigency to families/individuals in crisis situations.

Office or Division:	City Social Welf Emergency We	fare and Development Office Ifare Division		
Classification:	Simple			
Type of Transaction:	G2C – Governn	nent to Citizens		
	•	esidents who are indigent and In Crisis		
Who may avail:	Situation	WILEDE TO SECURE		
A. Social Case Study Repo		WHERE TO SECURE		
submitted to other Gove				
and Non-Government C	_			
a. Hospitalization As				
Clinical Abstra		Hospital/Medical Clinic		
Certificate (1 p	hotocopy)			
Hospital bill/lal	boratory (1	Hospital/Medical Clinic		
photocopy)		r iospital/iviedical Gillilic		
Barangay Cert	tificate of			
Indigency (1 p	,	Barangay where the client resides		
Valid ID of the		SSS, GSIS, Passport, Postal, Driver's		
client (patient)	(1 photocopy)	License, National ID		
b. Burial Assistance				
Death Certification	ate (1	Local Civil Registrar		
photocopy)				
<ul> <li>Signed Funera photocopy)</li> </ul>	al Contract (1	Funeral Parlor that provided the service		
<ul> <li>Barangay Ceri Indigency (1 p</li> </ul>		Barangay where the client resides		
<ul> <li>Valid ID of the client (patient)</li> </ul>	claimant and (1 photocopy)	SSS, GSIS, Passport, Postal, Driver's License, National ID		
c. Financial Assistan (Medicines/Mainte				
Medical Certifi	cate (1	Hospital/Medical Clinic		
photocopy)	printion (1			
<ul><li>Updated presorphotocopy)</li></ul>	ութսоп ( I	Hospital/Medical Clinic		
ρποιοσορу)				

- B. Certificate of Indigency
  - Barangay Clearance or Barangay Certificate of Indigency (Claimant)
  - Court Resolution/ Affidavit (photocopy)
  - Valid ID Card (Claimant)

Barangay where the client resides

Court

SSS, GSIS, Passport, Postal, Driver's License, National ID

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Client walk-in and submit documents at the Emergency Division, CSWDO	Receive, conduct intake interview, and assess/check submitted documents	None	15 minutes	Social Welfare Assistant
2. Client wait for the approval	<ul><li>2.1. Assessment/ Preparation of Social Case Study Report or Certificate of Indigency</li><li>2.2. Submit for recommendation and approval</li></ul>	None	20 minutes 10 minutes	Social Welfare Officer I
3. Client receives the needed document	3. Release the needed Social Case Study Report/Certificate of Indigency	None	2 minutes	Social Welfare Officer I
TOTAL:		None	47 minutes	

# 2. Center-based programs for Children in Conflict with the Law (CICL)

Center-based Social Protection Services to Child and Youth Center which provides residential care and rehabilitative services to below 18 years old Children in Conflict with the Law (CICL).

Office or Division:		City Social Welfare and Development Child & Youth Welfare Division			
Classification:		Highly Technica	l		
Type of Transaction	n:	G2C – Governm	ent to Citize	ens	
Who may avail:		Children in Conf	lict with the	Law	
CHECKLIST OF				WHERE TO SI	
Birth Certifica	te (1 ph	otocopy)	F	Philippine Statistic	s Authority
<ul> <li>Police or Bara photocopy)</li> </ul>	angay B	lotter (1		Police Stat	ion
CLIENTS STEPS	AGE	NCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
The client is turned over to the center	Conduct intake     interview with the     client		None	30 minutes	Houseparent
The client     answers the     questions asked	2.1. Administer Act of Discernment Test		None	7 days	
by the social worker based on the discernment		nment Report		1 day	
tool	Discer	ubmit the nment Report CSWD Officer proval		2 hours	Social Welfare Officer III
	2.4. Submit approved/noted Discernment Report to the City Prosecutor's Office			2 hours	
3.1. Clients avail of the services while at the Center	Ca	rovides home are and support ervices	None	24 hours	

3.2. Client	3.2. Monitors daily			House parents
participates in the daily activities	activities			'
3.3. Client participates in other activities being conducted in the center in coordination with other GOs and NGOs	3.3. Assist in the conduct of the activity		3 hours	
3.4. Client bonds with relatives during visiting hours	<ul><li>3.4. Inspect/monitor visitors during visiting times</li><li>3.5. Logging in to the guest logbook</li></ul>		2 hours	
Attends court     hearings	4. Assists the CICL during hearings	None	4 hours	Social Welfare Officer III
5. Waits for the court decision	5.1. Assists in the preparation of documents needed for the processing of bail (if the client opted to post bail)	None	3 hours	
	5.2. Coordinate with the NTSB, for the transfer of a client with a suspended sentence		1 day	Social Welfare Officer III
	5.3. Prepare documents (court order, birth certificate, and Social Case Study Report) to be submitted to the NTSB via e-mail		2 days	

6. Attends the pre- discharge conference	6. Facilitate pre- discharge conference	None	2 hours	Social Welfare Officer III
7. Minor reintegrated to family or transferred to another agency	7.1. Release the minor to the family and facilitate the signing of the discharge slip	None	2 hours	Social Welfare Officer III
	7.2. Turn over to NTSB		1 day	Social Welfare Officer III
TOTAL:		None	24 hours for temporary shelter/stay of children in the shelter depending on the case	

# 3. Community-based Drug and Rehabilitation Program

Refers to the most cost-effective approach to support PWUDs who were assessed with mild/low drug use and dependence.

Office or Division:	Cavite City Dru	Cavite City Drug Abuse Response Center			
Classification:	Highly Technica	al			
Type of Transaction:	G2C – Governr	ment to Citize	ens		
Who may avail:	Persons Who U	Persons Who Used Drugs (PWUDs)			
CHECKLIST OF RE	QUIREMENTS		WHERE TO SE	ECURE	
Barangay Clearar	nce (1 original)	Bar	angay where the	client resides	
Valid ID		SSS, GSI	GSIS, Passport, Postal, Driver's License, National ID		
CLIENTS STEPS A	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
	AGENCY ACTION  I. Conduct Intake Interview				

	Screening Test (ASSIST)				
3.	J	3. Refer the client to	None	15 minutes	CHO Medical Officer
	physical/medical	City Health Office			
	examination and	for a			
	submit results to	physical/medical			
	CCDARC	examination			
4.	PWUDs with	4. Facilitate 3-month	None		Multi-disciplinary
	mild/moderate	intensive CBDRP			team and volunteers
	ASSIST results				
	will attend 3-				
	month intensive				
	CBDRP				
5.	Attend CBDRP	5. Facilitate CBDRP	None		Multi-disciplinary
	after-care	after-care			team and volunteers
	program for 3	program for 3			
	months	months			
	TOTAL:		None	2 hours and 45 minutes	

#### 4. Disaster Relief Assistance

Provision of appropriate assistance to individuals/families affected by natural or man-made calamities during its onset.

#### A. Outside Evacuation Centers

Office or Division:	City Social Well	City Social Welfare and Development Office			
Classification:	Highly Complex	(			
Type of Transaction	n: G2C – Governn	nent to Cit	izens		
	Affected individ	uals/famili	es of natural or m	nan-made	
Who may avail:	calamities				
CHECKLIST OF	REQUIREMENTS		WHERE TO S	ECURE	
<ul> <li>Fire Certificati</li> </ul>	ion from the Bureau		Bureau of Fire F	Protection	
of Fire Protect	tion (if fire incident)				
	,				
Certificate of I	Eligibility	City So	cial Welfare and D	Development Office	
Oct illicate of t	Liigibiiity	-		•	
		FFFC			
OLIENTO OTERO	A OFNOV A OTION	FEES	PROCESSING	PERSON	
CLIENTS STEPS	AGENCY ACTION	TO BE	TIME	RESPONSIBLE	
		PAID   REST STORES			
1. Enlist/inform	<ol> <li>Receives reports</li> </ol>	None	10 minutes	CSWDO Staff	
the CSWDO	of the number of				
on the list of	affected families				

affected families from	and individuals from barangays			
barangays	nom barangays			
The client undergoes an intake	2.1. Conduct intake interview	None	5 minutes per client	CSWDO Staff
interview	2.2 Provide hot meals and other non-food items		Immediately	
	2.3 Onsite validation (structural assessment to be conducted by City Engineer's Office)		1-3 days depending on the number of affected families	
3. The client gets the assistance	Provision of relief     assistance and     other support     assistance	None	Immediately (3-5 days)	
TOTAL:		None	3 hours and 10 minutes	

#### **B. Inside Evacuation Centers**

Office or Division:		City Social Welf	City Social Welfare and Development Office		
Classification:		Highly Complex			
		G2C – Government to Citizens			
Type of Transaction	n:	G2G – Governn	nent to Go	overnment	
		Affected individ	uals/famili	es of natural or m	nan-made
Who may avail:		calamities			
CHECKLIST OF	REQU	UIREMENTS WHERE TO SECURE			
<ul> <li>Fire Certifica</li> </ul>	tion fro	m the Bureau		Bureau of Fire F	Protection
of Fire Protect	ction (if	fire incident)			
Certificate of Eligibility			City Social Welfare and Development Office		
CLIENTS STEPS	AGE	NCY ACTION	FEES TO BE PAID  PROCESSING TIME  PERSON RESPONSIBLE		
Affected individuals/fam		etting up of ation Center/s	None	2 hours	CSWDO other LGU Offices

				_
ilies are	and provision of			
temporarily	support services			
sheltered in	1.0 Dravision of hot		lmomo o di otolu	CCMDO staff an
Evacuation	1.2 Provision of hot		Immediately	CSWDO staff on
Center/s	meals and other			duty
	necessities (sleeping			Barangay Nutrition
	kits, hygiene kits,			Scholar
	etc.) during the stay of evacuees in the			
	evacuation center			
	evacuation center			
	1.3 Conduct of intake		5 minutes per	CSWDO staff on
	interview		client	duty
			55	2.2,
	1.4 Prepare and			
	submit DROMIC		2 hours	Social Welfare
	Report / Incident			Assistant
	Report			
	4 5 7 10 1 10 10 11			0 : 134/ 1
	1.5 Validation in the		2-3 days or	Social Worker
	area/site		more	CSWDO Staff
			depending on the number of	Child
			affected	Development Worker
			families	City Engineering
			iaiiiiles	Office
				Omoo
	1.6 Cleansing of		2-3 days or	CSWDO Technical
	master list		more	Staff
			depending on	
			the number of	
			affected	
			families	
2. Attend meetings	2.1 Conduct meetings	None	2 hours	CSWDO
conducted by the	with the evacuees			other LGU Offices
City regarding the				concerned
rehabilitation plan			0 4	
	2.2 Implementation of		2 days or	
	the rehabilitation plan		longer	
			depending on the number of	
			affected	
			families	
			iaiiiiles	

	3. Preparation Termination Report	of	None	1 day	Social Welfare Assistant
TOTAL:			None	Depends on the severity of the damage and the number of affected families	

# 5. Issuance of Certificate of Disability

Issuance of certification to Persons with Disabilities (PWDs) for SSS, PhilHealth, or GSIS benefit claims.

Office or Division:		City Social Welfare and Development Office Persons with Disabilities Affairs Office				
Classification:		Simple				
Type of Transaction	n:	G2C – Governn	nent to Cit	tizens		
Who may avail:		Persons with Di	sabilities			
CHECKLIST OF	REQL	JIREMENTS		WHERE TO S	ECURE	
Barangay Clo			Ва	rangay where the	e client resides	
<ul> <li>PWD Identification</li> <li>photocopy)</li> </ul>	cation (	Card (1				
CLIENTS STEPS	AGE	NCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Undergo     interview/scree     ning and     submit     documentary     requirements	intervi client submi docun	onduct an initial ew with the and receive the tted nentary ements	None	10 minutes	PDAO Staff	
	Certifi Disabi the Ce	eparation of cate of ility and submit ertificate to Worker for ure		10 minutes	PDAO Staff	

2. The client	2. Release	of	None	15 minutes	PDAO Staff
receives the	Certificate	of			
requested	Disability				
certification					
TOTAL:			None	25 minutes	

# 6. Issuance of Parental Capability Assessment Report (PCAR)

A report issued to the requesting agency to establish whether or not the parents are adequately equipped in providing appropriate and stable emotional and physical care to their children.

Office or Division:		City Social Welfare and Development Child and Youth Welfare Division				
Classification:		Highly Technica	al			
Type of Transaction:		G2G – Governr	ment to Gove	ernment		
Who may avail: Requesting a			ency			
CHECKLIST OF R	EQU	IREMENTS		WHERE TO SE	ECURE	
<ul> <li>Request letter (1</li> </ul>	1 orig	inal)				
Social Case Stu	dy R	eport of the	Requesting	agency		
client/ Case sum	nmary	y (1 original)				
CLIENTS STEPS	AGE	NCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Upon receiving the request of Parental Capability Assessment Report from partner agencies, conduct home visitation to client's family.	Fe Re Vi	epares eedback eport on Home sitation onducted.	None	2 hours	Social Welfare Officer III	
and gather collateral information from neighbor	Pare	epares the ntal Capability ssment Report AR)	None	2 minutes	Social Welfare Officer III	
to the concerned agencies	Pare	gns the ntal Capability essment Report AR)	None	2 minutes	City Social Welfare and Development Officer	

TOTAL:	None	2 hours and 4	
IOIAL.	None	minutes	

# 7. Issuance of Persons with Disabilities (PWD) Identification Card

Issuance of Identification Cards and Purchase Booklet for the availment of benefits and privileges for Persons with Disabilities (PWDs).

and privileges for Persons with Disabilities (PWDs).						
Office or Division:		Persons with Disa	abilities Affairs Office (PDAO)			
Classification:		Simple				
Type of Transaction	Type of Transaction: G2C – Governme			<b>,</b>		
Who may avail:				rmanent disability	,	
CHECKLIST O	F REQI	JIREMENTS		WHERE TO SEC	URE	
<ul> <li>Barangay Clearance (1 original)</li> <li>Medical Certificate or Document to confirm the medical or disability condition (1 photocopy)</li> <li>ID picture (1x1 picture - 3 pcs.)</li> <li>Valid ID (1 copy)</li> </ul>		Barangay where the client resides  Hospital/Respective Health Center  SSS, GSIS, Passport, Postal, Driver's  License, National ID				
CLIENTS STEPS	AGI	ENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Inquire at Persons with Disability     Affairs Office on requirements     Accomplishing the	red	rm the client of the quired documents.	None	10 minutes  30 minutes	Social Welfare Assistant Social Welfare	
PWD Registration Form manually.	filling	g out the PWD stration Form	None	30 minutes	Assistant	
3. Submission of the accomplished PWD Registration Form and requirements	PWE Card Book 3.2. Tr Ident and to the	reparation of the Didentification and Purchase clet ransmit the PWD tification Card Purchase Booklet e City Mayor's e for signature	None	30 minutes 30 minutes	Social Welfare Assistant	
4. Claiming of signed PWD ID and Purchase Booklet	the F	ord and release PWD ID and hase Booklet	None	10 minutes	Social Welfare Assistant	

TOTAL:	None	1 hour and 50 minutes	
		IIIIIIutes	

#### 8. Issuance of Solo Parent ID

Refers to the issuance of Identification Cards to Solo Parents to avail privileges mandated by the law.

	City Social Wel	fare and Development	
Office or Division:	•	nmunity Welfare Division	
Classification:	Complex		
Type of Transaction:	G2C – Government to Citizens		
Who may avail:	Solo parent		
CHECKLIST OF REQUI	REMENTS	WHERE TO SECURE	
<ul> <li>A. Birth of a child as a consequence of rape</li> <li>Barangay affidavit</li> <li>Birth certificate/s of child/children</li> <li>Complaint affidavit</li> <li>Medical Record on the incidence of rape</li> <li>Notarized Sworn Affidavit that he/she has the sole parental care and support of the children</li> </ul>		Barangay where the client resides Philippine Statistics Authority Hospital Public Attorney's Office	
<ul> <li>Certificate of Attend</li> <li>B. Widow/widower</li> <li>Barangay affidavit</li> <li>Birth certificate/s of</li> <li>Marriage Certificate</li> <li>Death Certificate</li> <li>Affidavit of non-coh parenting</li> <li>1x1 picture (2 pcs)</li> <li>Certificate of attend</li> <li>(For renewal, bullet #5 and attended)</li> <li>C. Spouse of a person deposition</li> </ul>	child/children abiting/non-co- ance #6)	City Social Welfare and Development Office  Barangay where the client resides Philippine Statistics Authority Philippine Statistics Authority Philippine Statistics Authority Public Attorney's Office  City Social Welfare and Development Office	
(PDL)  Barangay Affidavit  Birth certificate/s of		Barangay where the client resides Philippine Statistics Authority	

- Marriage Certificate
- Certificate of Detention
- Affidavit of non-cohabiting
- 1x1 picture (2 pcs)
- Certificate of attendance

(For renewal, bullet \$4, 5, & 6)

- D. Spouse of a person with disability (PWD)
  - Barangay affidavit
  - Birth certificate/s of child/children
  - Medical Records or Certificate issued not more than 3 months
  - Affidavit of non-cohabiting/non-coparenting
  - 1x1 picture (2pcs)
  - Certificate of Attendance

(For renewal, bullet #3, 4 & 5)

- E. Due to de facto separation
  - Barangay Affidavit
  - Birth certificate/s of child/children
  - Marriage Certificate
  - Affidavit of non-cohabiting/non-coparenting
  - Affidavit of two disinterested persons attesting to the fact of separation of the spouses
  - 1x1 picture (2 pcs)
  - · Certificate of Attendance

(For renewal, bullet #4, 5, &6)

- F. Due to the nullity of marriage
  - Barangay affidavit
  - Birth certificate/s of child/children
  - Marriage Certificate, with the fact of declaration of nullity, or annulment of marriage
  - Affidavit of non-cohabiting/non-coparenting
  - 1x1 picture (2 pcs)
  - Certificate of Attendance

(For renewal, bullet #4 & 5)

Philippine Statistics Authority
Bureau of Jail Management and Penology
Public Attorney's Office

City Social Welfare and Development Office

Barangay where the client resides
Philippine Statistics Authority
Hospital/Clinic

Public Attorney's Office

City Social Welfare and Development Office

Barangay where the client resides Philippine Statistics Authority Philippine Statistics Authority

Public Attorney's Office

Public Attorney's Office

City Social Welfare and Development Office

Barangay where the client resides

Philippine Statistics Authority

Philippine Statistics Authority

Public Attorney's Office
City Social Welfare and Development Office

#### G. Abandoned

- Barangay Affidavit
- Birth certificate/s of child/children
- Marriage Certificate
- Affidavit of two disinterested persons attesting to the abandonment of the spouse
- Police or barangay record of the fact of abandonment
- Notarized Sworn Affidavit of the SP that he/she has the sole parental care and support of the child/children.
- 1x1 picture (2 pcs)
- Certificate of Attendance

(For Renewal, bullet #6 and 7)

- H. Spouse of an Overseas Filipino Worker
  - Barangay Affidavit
  - Birth certificate/s of child/children
  - Marriage Certificate (if married)
  - Proof of relation between the applicant and OFW if a family member
  - Photocopy of passport as proof of continuous overseas employment for the last 12 months
  - POEC-Sec or any equivalent document
  - Affidavit of non-cohabiting
  - 1x1 picture (2 pcs)
  - Certificate of Attendance

(For renewal, bullet #4, 5, 6,7, and 8)

- Unmarried mother/father who keeps and rears his/her child/children
  - Barangay Affidavit
  - Birth certificate/s of child/children
  - Certificate of no Marriage (CENOMAR)
  - Affidavit of non-cohabiting/non-coparenting

Barangay where the client resides Philippine Statistics Authority Philippine Statistics Authority

Public Attorney's Office

Philippine National Police

Public Attorney's Office

City Social Welfare and Development Office

Barangay where the client resides Philippine Statistics Authority Philippine Statistics Authority

Philippine Overseas Employment Administration

Public Attorney's Office

City Social Welfare and Development Office

Barangay where the client resides Philippine Statistics Authority

Philippine Statistics Authority
Public Attorney's Office

- 1x1 picture (2pcs)
- Certificate of Attendance (For renewal, bullet #1, 3, 4 and 5)
- J. Legal guardian, adoptive or foster parent who solely provides parental care and support to a child or children
  - Barangay Affidavit
  - Proof of guardianship, proof of adoption, or proof of Foster Care
  - Affidavit of non-cohabiting/non-coparenting
  - 1x1 picture (2 pcs)
  - Certificate of Attendance

(For renewal, bullet #1, 3 & 4)

- K. Any relative within the fourth (4<sup>th</sup>) civil degree of consanguinity or affinity
  - Barangay Affidavit
  - Birth certificate/s of child/children
  - Death Certificate or Judicial declaration of absence or presumptive death of the parents or legal guardian
  - Proof of relationship of the relative to the legal guardian (Birth Certificate)
  - Affidavit of non-cohabiting
  - 1x1 picture (2 pcs)
  - Certificate of Attendance

(For renewal, bullet #4, 5 & 6)

- L. A pregnant woman who provides sole parental care and support to her unborn child or children
  - Barangay Affidavit
  - Medical Record of her pregnancy
  - Affidavit of non-cohabiting/non-coparent who is providing support to the pregnant woman
  - 1x1 picture (2 pcs)
  - Certificate of Attendance

City Social Welfare and Development Office

Barangay where the client resides

Public Attorney's Office

City Social Welfare and Development Office

Barangay where the client resides
Philippine Statistics Authority
Philippine Statistics Authority

Philippine Statistics Authority

Public Attorney's Office

City Social Welfare and Development Office

Barangay where the client resides Hospital/Clinic

Public Attorney's Office

City Social Welfare and Development Office

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Undergo initial     Interview/     screening	Conduct an initial interview with the applicant	None	30 minutes	Social Welfare Officer I
2. Fill out Solo Parent Application Form and submit the requirements	2.1. Screen the requirements and Solo Parent Application Form	None	At least 7 working days	Social Welfare Officer I
	2.2. Encode the client's information in the database and prepare the Solo Parent ID			Social Welfare Assistant
	2.3. Submit the Solo Parent ID to the CSWD Officer for signature.			Social Welfare Assistant
	2.4. Transmit the Solo Parent ID to the City Mayor's Office for signature.			Social Welfare Assistant
3. Claim the Solo Parent ID	3. Issue the Solo Parent ID to the client and inform		10 minutes	Social Welfare Assistant
TOTAL:		None	7 days & 35 minutes	

Note: Counting of processing time will commence upon receipt of complete documentary requirements from the Solo Parent applicant.

#### 9. Job Referral and Placement

Conduct employment/skills assessment and job matching for referral and placement to companies.

Office or Division:	Public Employment Service Office (PESO)		
Classification:	Simple		
Type of Transaction:	G2C – Government to Citizens		
Who may avail:	Job seekers		
CHECKLIST OF REQU	WHERE TO SECURE		
Resume/Curriculum Vi	tae/Biodata	Personal	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Attend intake     interview for     initial	Conduct intake     interview and initial     assessment	None	30 minutes	Project Evaluation Officer III
assessment  2. Fill out the Jobseeker Registration Form	2.1 Receive the Registration Form	None	30 minutes	Project Evaluation Officer III
FOITI	2.2 Encode applicant's data to the National Skills Registry System		15 minutes	Encoder
3. Attend Job Coaching	3. Conduct Job Coaching	None	30 minutes	Project Evaluation Officer III
4. Job applicant proceeds to the company with the endorsement/referral letter	4. Issue an endorsement letter/referral letter	None	20 minutes	Project Evaluation Officer III
TOTAL:		None	2 hours and 5 minutes	

# 10. Provision of Assistive Devices and other Support

Assistance is provided to PWDs to enable them to carry out daily activities and participate actively and productively in community life.

Office or Division:	Persons with Disabilities Affairs Office (PDAO)			
Classification:	Simple			
Type of Transaction:	G2C – Governr	ment to Citizens		
Who may avail:	Senior Citizens	and Persons with Disabilities (PWDs)		
CHECKLIST OF REQU	IREMENTS WHERE TO SECURE			
Barangay Clearance, original)	/Indigency (1	Barangay where the client resides		
Medical Certificate of confirm the medical condition (1 photocopy     Recent whole-body p	or disability by)	Hospital		

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Undergo initial     Interview/     screening to the     client (Claimant)	Conduct initial     Interview and     screening to the     client (Claimant)	None	20 minutes	Social Welfare Officer I
2. Fill out the application form and submit the requirements	2.1 Screening of submitted requirements and application form for assessment and evaluation	None	At least 10 days	Social Welfare Officer I
	2.2. Record/Log claimants' information in the clientele database			Social Welfare Assistant
	2.3. Processing of Technical Device Assistance			Social Welfare Officer I
	2.4. Coordinate with the City Mayor regarding the schedule of releasing the technical device.			Social Welfare Officer I
Claiming of technical device	3.1. Release the Technical device request	None	25 minutes	Social Welfare Officer I
TOTAL:		None	10 days and 45 minutes	

# 11. Registration of Children in Early Childhood Care and Development (ECCD) Service

Provision of early childhood care and development, programs, and activities to enhance the physical, emotional, cognitive, psychological, spiritual, and language development of young children.

Office or Division:	City Social Welfare and Development
Office of Division.	Child and Youth Welfare Division

Classification:	Simple		
Type of Transaction:	G2C – Government to Citizens		
Who may avail:	3- 4 years old and 11 months pre-school		
CHECKLIST OF REQU	WHERE TO SECURE		
<ul> <li>Child's Birth Certificat</li> </ul>	e (1	Local Civil Registrar Office/Philippine Statistics	
photocopy)		Authority	

Immunization Records (1 photocopy)

Authority

Health Center/Private Clinic/Hospital

• ID pictures

o 1x1 picture (1pc)

o 2x2 picture (1pc)

Ο ΖΑΖ βιστ	I		DD00E00INO	DEDOON
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Child stays in his/her home	Mapping/survey     of children in the     barangay	None	15 minutes	Child Development Worker
2. Parents attend meetings/orientation	2. Meeting on ECCD mode of learning and informing the parents of the required documents.	None	1 hour	Child Development Worker
Fill out the registration form	3. Assist the parents in filling out the registration form	None	20 minutes	Child Development Worker
Submit the necessary documents	4. Screen of submitted documents	None	10 minutes	Child Development Worker
5. Parent assists his/her child in doing the structured activities at home	5. Provide learning materials/modules	None	2 hours a day	Child Development Worker
6. Parent provides feedback on the progress of his/her child's learning	6. Conduct weekly monitoring through home visitation or video conferencing/ messages.	None	15 minutes/ child	Child Development Worker
7.1. Child participates in the CDC	7.1. Provides hot meals and dry ration foods for	None	20 minutes	

Supplementary Feeding	Supplementary Feeding			Child
7.2. Parent assists in getting the child's monthly height and weight	7.2. Conduct height and weight monitoring		10 minutes	Development Worker
7.3. Child completes the 10-month modular sessions	7.3. Termination of service/recognition ceremony		3 hours	
TOTAL:		None	1 day	

# 12. Request for assistance to a child alleged victim of abuse, neglect, and exploitation

Refers to the handling and management of children needing special protection and appropriate intervention.

Office or Division:		City Social Welfare and Development Office Special Cases Division			
Classification:		Complex			
Type of Transaction	n:	G2C – Government to Citizens			
Who may avail:		Children Needing Special Protection			
CHECKLIST OF	REQU	IREMENTS		WHERE TO S	ECURE
Birth Certifica	te (1 pł	notocopy)	Loca	al Civil Registrar (	• •
Baptismal Ce	rtificate	(1 photocopy)	Statistics Authority ) Church		
School Records (1 photocopy)			Schoo	I	
CLIENTS STEPS	AGE	NCY ACTION	FEES TO BE PAID  PROCESSING RESPONSIBLE		
Client is turned     over to the     center	_	nduct intake nterview	None	30 minutes	Social Welfare Officer III
Child undergoes     medical or     medico-legal	wit	sist the minor th the medical medico-legal	None	1 day	Social Welfare Officer III

examination if needed	examination in Health Center or Child Protection Unit – PGH			
3. Child gives a statement at PNP – WCPD if needed	3. Assist the child/minor to give a statement at the PNP-WCPD	None	4 hours	Social Welfare Officer III
4. Goes to the Prosecutor's Office to personally submit Sworn Statement, if needed	4. Assist in filing the case at the Prosecutor's Office	None	4 hours	Social Welfare Officer III
5. Child/minor is transferred to other institution for temporary shelter	5. Refer to other institutions for temporary shelter	None	4 hours	Social Welfare Officer III
TOTAL		None	*1 day to 2 months	

<sup>\*</sup>Provision of assistance may be extended depending on the case.

# 13. Rescue operation for Children at Risk (CAR)

Conduct rescue operations for Children at Risk (CAR) – street children, abandoned, physically, emotionally, and sexually abused children.

Office or Division:		City Social Welfare and Development Child and Youth Welfare Division			
Classification:		Highly Technica	al		
Type of Transaction	า:	G2C – Governr	ment to Citize	ens	
Who may avail:		Children at Risk	<		
CHECKLIST OF	REQU	REMENTS		WHERE TO SE	CURE
<ul><li>Birth Certificat</li><li>Referral letter</li><li>PNP (1 photos</li></ul>	from B				resides/Philippine
CLIENTS STEPS	AGE	NCY ACTION	FEES TO PROCESSING PERSON BE PAID TIME RESPONSIBLE		
Undergo intake interview	Inte	onduct Intake erview with the ent upon	None	5 days	Social Welfare Officer III

	referral to the barangay or PNP 1.2. Conduct home visitation for data gathering			Social Welfare Officer III
	1.3. Prepare Case Study Report			
	1.4. Develop a treatment plan based on the assessment of			
Participate in the activities based on the treatment plan	needs			
TOTAL		None	5 days	

# 14. Request for Certificate of Indigency and Registration as Urban Poor member

Issuance of Certificate of Indigency and registration as Urban Poor members in support of their water and electric installation application.

Office or Division:	Urban Poor Affairs Office				
Classification:	Simple				
Type of Transaction:	G2C – Governr	nent to Citizens			
Who may avail:	Urban Poor me	mbers			
CHECKLIST OF REQU	IREMENTS	WHERE TO SECURE			
Barangay Clearance (1 photocopy)		Barangay where the client resides			
Barangay Indigency (1 photocopy)		Barangay where the client resides			
<ul><li>Sworn Statement (for Meralco only)</li><li>- (1 photocopy)</li></ul>		Public Attorney's Office			
<ul> <li>Urban Poor Membership form (for non-members)</li> </ul>					

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request for	1.1 Screen the	None	30 minutes	Social Welfare
Certificate of	requirements			Officer I
Indigency or	submitted by the			
proof of	client.			
membership				
	1.2. If a non-Urban			
	Poor member,			
	issue an Urban			
	Poor Membership			
	Form and advise			
	the client to			
	process			
	membership in			
	his/her respective			
	barangay.			
	1.3 Prepare the			
	Certification for the			
	signing of the CSWD			
	Officer			
TOTAL		None	*1-2 days	

<sup>\*</sup>Depending on the availability of the client's requirements upon inquiry

# 15. Request for Pre-marriage orientation and counseling

It refers to the orientation and counseling provided to couples before getting married as mandated by the Family Code.

Office or Division:	•	City Social Welfare and Development Family and Community Welfare Division			
Classification:	Simple	Simple			
Type of Transaction	G2C – Govern	ment to Citize	ens		
Who may avail:	Couples who a	Couples who are planning to get married			
CHECKLIST OF I	REQUIREMENTS	UIREMENTS WHERE TO SECURE			
Official Receipt     PMC Forms	t (1 original)		City Treasurer's	s Office	
<ul> <li>Valid ID (1 photocopy)</li> </ul>					
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	

1. Inquire at the	1. Inform/advise of	None	15 minutes	Social Welfare
Family and	the needed			Assistant
Community	requirements			
Welfare Division				
2. Fill out Pre-	2. Check the filled-	None	30 minutes	Social Welfare
Marriage	out Pre-Marriage			Assistant
Counseling Forms,	Counseling Forms			
answer the	and questionnaires			
questionnaires, and	and receive a copy			
Official Receipt	of the Official			
	Receipt			
3. Attend Pre-	3.1. Conduct Pre-	None	3 hours	Social Welfare
Marriage	Marriage Counseling			Officer I
Counselling Session	for couples to be			
	married			
	3.2. Prepare the Pre-			Social Welfare
	Marriage Counseling			Assistant
	Certificate			
4. Claim the Pre-	4. Issue the Pre-	None	15 minutes	Social Welfare
Marriage Counseling	Marriage Counseling			Assistant
Certificate	Certificate			
TOTAL		None	4 hours	

# 16. Special Program for Employment of Students

It refers to the temporary employment of poor but deserving students during summer, providing them with compensation to support/provide their educational needs.

Office or Division:	Public Employment Service Office				
Classification:	Simple				
Type of Transaction:	G2C – Government to Citizens				
Who may avail:	Indigent students				
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
<ul> <li>Latest school registration form (3 photocopies)</li> </ul>		School where the student is enrolled			
Birth Certificate/Baptismal     Certificate (1 photocopy)		Local Civil Registrar's Office			
<ul> <li>Parent's residence certificate (1 photocopy)</li> </ul>					

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client accomplishes the SPES Application Form along with other documentary requirements	1. Receive and screen the documents submitted by the student	None	5 minutes/applicant	Project Evaluation Officer III
2. Attend orientation and sign the contract	2.1. Facilitate orientation and signing of the contract  2.2. Processing and submission of documents to DOLE	None	1 hour	Project Evaluation Officer III
3. Participate in the SPES for 22 days	3. Monitoring of SPES implementation	None	22 days	Project Evaluation Officer III
4.1 Receive LGU- counterpart compensation	4.1 Facilitate release of LGU-counterpart compensation	None	2 days	Project Evaluation
4.2. Wait for further advice on the schedule of DOLE compensation release for payout	4.2. Facilitate release of DOLE compensation			Officer III
TOTAL		None	24 days, 1 hour, and 5 minutes	