

Republic of the Philippines  
DEPARTMENT OF LABOR AND EMPLOYMENT  
Regional Office No. \_\_\_\_\_

**APPLICATION FOR REGISTRATION**

|   |                         |   |
|---|-------------------------|---|
| <b>PART I. INFORMATION ABOUT THE APPLICANT ORGANIZATION</b><br>(To be accomplished by the applicant. Supply all required information. Misrepresentation, false statement or fraud in this application or in any supporting document is a ground for denial or cancellation of registration.)  |                         | Date Accomplished:  |
| Name of Applicant Organization  |                         |   |
| Address   |                         | Place/s of Operation of Union   |
| Name of President (Last) (First) (Middle)   |                         | Address   |
| Date Organized (Day) (Month) (Year)   |                         | Date of CBL Ratification (If ratification was done on successive dates, state dates of ratification.) |
| Fiscal Period<br>[ ] Calendar Year [ ] Fiscal year (Pls. specify) _____   |                         | Status of Finances<br>[ ] w/ Financial Report [ ] w/o Financial Report                                |
| <b>No. of Employees</b>   |                         |   |
| Employer  |                         | Bargaining Unit   |
| Male _____ Female _____   | Male _____ Female _____ | Union Members   |
| Male _____ Female _____   |                         |   |
| <b>Description of the Bargaining Unit (Check all appropriate boxes)</b>   |                         |   |
| Composition: [ ] Supervisory [ ] Rank and File<br>Structure: [ ] Employer Unit [ ] Occupational Unit [ ] Geographical Unit<br>Sectoral Classification: [ ] Industry [ ] Services [ ] Agriculture<br>Occupational Classification: [ ] Technical [ ] Administrative [ ] Faculty [ ] Professional<br>Mode of Payment of Wages: [ ] Monthly-paid [ ] Daily-paid |                         |   |
| I attest to the truth of the foregoing.   |                         |   |
| _____<br>Authorized Representative / Position in the Union<br>(Signature over printed name)   |                         |   |
| SUBSCRIBED AND SWORN TO before me at _____, Philippines<br>this ___ day of _____ 200___, by _____ with Community Tax<br>Certificate No. _____ issued at _____ on _____.   |                         |   |
| NOTARY PUBLIC   |                         |   |
| Doc No. _____<br>Page No. _____<br>Book No. _____<br>Series of _____  |                         |   |

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|---|-----------------------|-----------------------|
| <b>PART II. PROCESSING OF REQUIREMENTS</b><br>(To be accomplished by the processor in the Bureau)   | <b>Date Received:</b> |                       |
| <p>A. Checklist of documents, each of which must be certified under oath by the Secretary or Treasurer and attested to by the President. Documents not so certified and attested shall not be considered as compliance.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> 1. Name of the organization's officer and their respective addresses</li> <li><input type="checkbox"/> 2. Minutes of the organizational meeting/s</li> <li><input type="checkbox"/> 3. List of the members who participated in the organizational meeting/s</li> <li><input type="checkbox"/> 4. Names of all its members comprising at least thirty percent (30%) of the employees in the appropriate organizational unit where the applicant seeks to operate</li> <li><input type="checkbox"/> 5. Two (2) copies of the financial reports if the applicant organization has been in existence for one year or more</li> <li><input type="checkbox"/> 5a. Financial report not required because applicant organization has been in existence for less than one year or has not collected any amount</li> <li><input type="checkbox"/> 6. Four (4) copies of the constitution and by-laws which must be attached the names and signatures of ratifying members</li> <li><input type="checkbox"/> 7. Minutes of adoption or ratification of the constitution and by-laws and dates/s when ratification was made</li> <li><input type="checkbox"/> 7a. 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</li> <li><input type="checkbox"/> 8. Certification from the administrative or personnel officer as to the total number of rank and file employees</li> </ul> <p>B. Payment of Registration Fee</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Registration Fee paid under O.R. No. _____ Date _____</li> <li><input type="checkbox"/> Registration Fee not paid</li> </ul> <p>C. Recommendation on the Application:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Recommending Approval with Certificate of Registration attached</li> <li><input type="checkbox"/> Recommending Denial due to failure to comply with documentary requirements<br/>(Pls. specify lacking documents)</li> <li>1. _____</li> <li>2. _____</li> <li>3. _____</li> </ul> <p style="text-align: right; margin-right: 100px;">By: _____<br/>Processor<br/>(Signature over printed name)</p> <p style="text-align: right; margin-right: 100px;">Date: _____</p> |                       |                       |
| <b>PART III. ACTION ON THE APPLICATION</b>  |                       |                       |
| <p><b>A. Approval /Denial</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Approved for Registration with duly signed Certificate of Registration attached</li> <li><input type="checkbox"/> Registration denied, with duly signed Notice of Denial</li> </ul> <p>Respectfully endorsed to the Director</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> For approval of the Certificate of Registration</li> <li><input type="checkbox"/> For approval of Notice of Denial</li> </ul> <p style="text-align: center; margin-top: 20px;">             _____<br/>             Director/Head Field office <span style="float: right;">_____</span><br/>             Date         </p> <p style="margin-top: 20px;">             Approved for release. <span style="float: right;">_____</span><br/>             Name, Releasing Officer <span style="float: right;">_____</span><br/>             Date         </p>  |                       |                       |
| <b>Registration Certificate No.</b>   | <b>Date Issued:</b>   | <b>Date Released:</b> |