



Republic of the Philippines  
**DEPARTMENT OF LABOR AND EMPLOYMENT**  
Regional Office No. 8

**APPLICATION FOR REGISTRATION**

<b>PART I. INFORMATION ABOUT THE APPLICATION REGISTRATION</b> <b>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.</b>		<b>Date Accomplished:</b>
Name of Applicant Association	Address	
Name of President (Last) (First) (Middle)	Address	
Date Organized (Day) (Month) (Year)	Date of CBL Ratification (if ratification was done on successive dates, state date of ratification)	
Place/s of Operation	No. of Members _____ Male _____ Female _____	
Occupation of Members. <i>Please check appropriate category.</i> <input type="checkbox"/> Agricultural workers ( <input type="checkbox"/> farmers { } Fisherfolk { } artisans { } cottage { } others _____ ) [ <input type="checkbox"/> Small transport workers (drivers: { } jeepney { } FX { } tricycle { } pedicab) <input type="checkbox"/> Homebased/Homeworkers <input type="checkbox"/> Small construction workers <input type="checkbox"/> Vendors ( { } market { } sidewalk { } ambulant) <input type="checkbox"/> Small-scale miners <input type="checkbox"/> Others/Own-Account, please specify _____		
Fiscal Period <input type="checkbox"/> Calendar Year <input type="checkbox"/> Fiscal Year (Please specify) _____	Status of Finances <input type="checkbox"/> w/ Financial Report <input type="checkbox"/> w/o Financial Report	
<p>I attest to the truth of the foregoing.</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Authorized Representative / Position in the Union Signature over printed name</p> <p>SUBSCRIBED AND SWORN TO before me at _____, Philippines this ___ day of _____ 200_, by _____ with Community Tax Certificate No. _____ issued at _____ on _____.</p> <p style="text-align: center;">NOTARY PUBLIC</p> <p>Doc. No. Page No. Book No. Series of 200_</p>		