



Republic of the Philippines  
DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS  
**CENTRAL OFFICE**  
Manila

**ACCREDITATION FORM**  
**For Civil Society Organizations**

Name of the organization /entity Mailing Address	
Telephone number(s)	
Fax Number(s)	
E-mail	
Website	
Year established	
Brief summary of the purpose and the activities of your organization / entity	
Total number of members and geographical distribution, if applicable	
Please check not more than two (2) desired interest of participation	<input type="checkbox"/> Project Identification <input type="checkbox"/> Project Preparation <input type="checkbox"/> Budgeting <input type="checkbox"/> Procurement <input type="checkbox"/> Project Implementation <input type="checkbox"/> Project Operation <input type="checkbox"/> Post Project Evaluation <input type="checkbox"/> Others, please specify _____
Programs and activities in areas relevant to good governance, infrastructure development, and other related activities	

***To complete your application for accreditation, attach authenticated copies of the following documents:***

1. Copy of Securities and Exchange Commission registration;
2. Copy of charter or constitution and by-laws and any other document that may explain the organization's purpose, aims, and initiatives;
3. Proof of interest in good governance, infrastructure development and other related activities, i.e. reports, press releases, news clippings, newsletters and other periodicals;
4. Should the applicant be a network, or similar member entity, a description of the membership system, indicating the total number of members, the type of their geographical distribution;
5. Other documents that may deemed necessary.

***Information concerning the contact person:***

Surname \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Position: \_\_\_\_\_

Phone : \_\_\_\_\_ Fax : \_\_\_\_\_ E-mail : \_\_\_\_\_

***Information concerning the contact person:***

Surname \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Position: \_\_\_\_\_

Phone : \_\_\_\_\_ Fax : \_\_\_\_\_ E-mail : \_\_\_\_\_

***Review and sign this statement:***

I confirm that the above information is true and complete. I understand that my organizations / entity's application is subject to review and approval by the Civil Society Organizations in the DPWH does not imply financial support for my participation.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Date: \_\_\_\_\_

***Please send the filled-out form together with the copies of the documents required above to the following mailing address:***

Stakeholders Management Section  
Stakeholders Affairs Division  
Stakeholders Relations Service  
Department of Public Works and Highways  
Bonifacio Drive, Port Area, Manila 1018

***or send the filled-out form and the required copies of the documents thru e-mail:***

*[citizens\\_feedback@dpwh.gov.ph](mailto:citizens_feedback@dpwh.gov.ph)*

***Thank you for applying for accreditation!***