



MSWD CITIZEN CHARTER

FRONTLINE SERVICE	AMOUNT OF FEES	REQUIREMENTS	STEP BY STEP PROCEDURE		PROCESSING TIME	SCHEDULE OF AVAILABILITY OF SERVICES	RESPONSIBLE PERSON
			Service Provider	Client			
ISSUANCE OF PERSON WITH DISABILITY MEMBERSHIP ID & PURCHASE BOOKLET/SLIP	None	<ul style="list-style-type: none"> ▪Certificate of Residency from the Punong Barangay ▪Medical Certification from a Public Physician ▪2 pcs 1x1 ID picture ▪Duly filled-up application form 	<ul style="list-style-type: none"> ➤ Entertain & assist the client to fill-up application form and inform the client of needed requirements 	Person with disability or duly representative	10 minutes	8:00am-5:00pm Monday to Friday	Irene T. Llana, RSW or alternate technical staff of the day
			<ul style="list-style-type: none"> ➤ Receive the requirements for verification ➤ Fill-up ID card, purchase booklet & have approval by the Mayor ,then issue & release to the client 	Person with disability or duly representative	30 minutes	8:00am-5:00pm Monday to Friday	PDAO Head
ISSUANCE OF SOLO PARENTS ID CARD MEMBERSHIP	None	<ul style="list-style-type: none"> ▪Certificate of Residency and as a solo parent from the Punong Barangay ▪2 pcs 1x1 ID picture ▪Duly filled-up application form 	<ul style="list-style-type: none"> ➤ Entertain & assist the client to fill-up application form, conduct assessment to the client for social case summary preparation and inform the client of the needed requirements 	Solo Parent	10 minutes	8:00am-5:00pm Monday to Friday	Irene T. Llana, RSW or technical staff of the day
			<ul style="list-style-type: none"> ➤ Receive the requirements and fill-up ID card membership then issue & release to the client 	Solo Parent	15 minutes	8:00am-5:00pm Monday to Friday	

FRONTLINE SERVICE	AMOUNT OF FEES	REQUIREMENTS	STEP BY STEP PROCEDURE		PROCESSING TIME	SCHEDULE OF AVAILABILITY OF SERVICES	RESPONSIBLE PERSON
			<i>Service Provider</i>	<i>Client</i>			
REQUEST FOR FINANCIAL ASSISTANCE TO INDIVIDUAL/FAMILY IN CRISIS SITUATION (AICS)	None None	<i>For medical assistance, comply the following requirements:</i> <ul style="list-style-type: none"> ▪ Barangay Certificate of Residency and Indigency ▪ Medical abstract ▪ Letter of Intent ▪ Xerox copies of prescription of medicines from the attending physician with license number appears below the signature ▪ Billing statement <i>For burial assistance:</i>	➤ Conduct Interview Intake and assessed the direct family members for the preparation of General Intake Sheets and Social Case Study Reports, then facilitate approval of the Mayor and processing will follow	Individual/Family in Crisis Situation (Children, Youth, FHONA, Elderly, PWD, Solo Parents)	1 day	8:00am-5:00pm Monday to Friday	Edendita N. Batiao, RSW Irene T. Llana, RSW Madonna S. Yao, RSW Joseph Caleb E. Rodriguez, RSW
CERTIFICATE OF TRAVEL CLEARANCE MINORS TRAVELLING DOMESTIC REQUEST SOCIAL CASE STUDY REPORT AND REFERRAL LETTER				Individual/family in crisis situation	10 minutes	8:00am-5:00pm Monday to Friday	

		<ul style="list-style-type: none"> ▪ Xerox copies (3 copies) of Death Certificate ▪ Funeral contract ▪ Barangay Certificate of Residency and Indigency ▪ Valid ID of authorized person <p><i>For transportation assistance:</i></p> <ul style="list-style-type: none"> ▪ Valid ID ▪ Bus tickets ▪ Extract Blotter ▪ ID ▪ Birth Certificate of the child ▪ Marriage Contract of the Parents ▪ Barangay Residency ▪ School Certification and School ID (if the child will attend school activity) ▪ Authorization of the escort from the sending party ▪ Valid ID of the escort <p>Barangay Certificate of Residency and Indigency Valid ID card</p>	<ul style="list-style-type: none"> ➤ Received the documents and conduct assessment to the child, parents and escort ➤ Formulation Social Case Summary report and Certification then submit to LCE for approval ➤ Fill-up Clearance form and Certification ➤ Release documents to clients ➤ Receive the required documents for referral to either in PCSO, DSWD, Medical Center and other donors of the client and conduct assessment in formulation of the Social Case Study Report ➤ Release the social case study report and referral letter to the client 	<p>Individual/Family in Crisis Situation</p> <p>Children</p> <p>FHONA</p>	<p>15 minutes</p> <p>4 hours</p>	<p>8:00am-5:00pm</p> <p>Monday to Friday</p> <p>8:00 a.m. -5:00 p.m.</p> <p>Monday to Friday</p>	<p>Irene T. Llana, RSW</p> <p>Madonna S. Yao, RSW</p> <p>Joseph Caleb E. Rodriguez, RSW</p>
--	--	--	--	---	----------------------------------	--	---

REQUEST FOR CERTIFICATE OF INDIGENCY	None	<ul style="list-style-type: none"> ▪ Certification from Pantawid Pamilya Program (4P's) Office If beneficiary or grantee of the program ▪ Certificate of Residency and Indigency from the Punong Barangay 	<p>Validate/assessed regarding the economic status of the client provide list of requirements to comply need for the (Court and other agency) conduct home visit, prepare home assessment report for issuance of certificate of indigency</p>	Family Head & Other Needy Adult (FHONA)	2 days	8:00am-5:00pm Monday to Friday	Irene T. Llana, RSW Madonna S. Yao, RSW Joseph Caleb E. Rodriguez, RSW
--------------------------------------	------	---	--	---	--------	-----------------------------------	--

FRONTLINE SERVICE	AMOUNT OF FEES	REQUIREMENTS	STEP BY STEP PROCEDURE		PROCESSING TIME	SCHEDULE OF AVAILABILITY OF SERVICES	RESPONSIBLE PERSON
			<i>Service Provider</i>	<i>Client</i>			
REQUEST FOR CERTIFICATE OF PRE-MARRIAGE COUNSELING (PMC)	None	<ul style="list-style-type: none"> ▪ Fill-up PMC Evaluation Form ▪ Attend Pre-Marriage Counseling/seminar 	<ul style="list-style-type: none"> ➤ Assist client to fill-up pre evaluation questionnaire 	Counselees/ would be-couple	5 minutes	8:00am-5:00pm Monday to Friday	technical staff of the day
			<ul style="list-style-type: none"> ➤ Conduct lectures & counseling 	Counselees/ would be-couple	4 hours	8:00am-12:00nn	Edendita N. Batiao, RSW
REQUEST FOR MARITAL COUNSELING		Fill-up Marriage Counseling Application form and Coordinate for schedule of counseling	<ul style="list-style-type: none"> ➤ Interview & assist client to fill-up marital conflict counseling application form & refer the case to MSWDO for schedule of counseling service to the client 	Legal Couple/ live –in partner	10 minutes	8:00am-5:00pm Monday to Friday	Edendita N. Batiao, RSW Irene T. Llana, RSW
			<ul style="list-style-type: none"> ➤ Conduct counseling to couple clients as per schedule 	Counselees/ legal couple or live in couple	2 hours	8:00am-5:00pm Monday to Friday	Edendita N. Batiao, RSW

ISSUANCE OF SENIOR CITIZEN'S ID AND PURCHASE BOOKLET & SLIP	none	<ul style="list-style-type: none"> ▪ Brgy. Certificate of Residency ▪ Birth Certificate/Voter's Affidavit/Affidavit of Birth/Passport ▪ 2 pcs 1x1 ID picture ▪ Filled up application forms 	➤ Provide application forms to senior citizens	Elderly Persons	1 minute	8:00am-5:00pm Monday to Friday	Madonna S. Yao Haydee S. Varron * alternate technical staff of the day
---	------	--	--	-----------------	----------	-----------------------------------	--

FRONTLINE SERVICE	AMOUNT OF FEES	REQUIREMENTS	STEP BY STEP PROCEDURE		PROCESSING TIME	SCHEDULE OF AVAILABILITY OF SERVICES	RESPONSIBLE PERSON
			<i>Service Provider</i>	<i>Client</i>			
			➤ Explain in filling up of the forms to the elderly person or the representative and the procedure to go to Office of the Senior Citizen Association (OSCA) office for processing of membership and approval from the officers	Elderly or duly representative	10 minutes	8:00am –5:00 p.m. Monday to Friday	Madonna S. Yao,RSW Haydee S. Varron * alternate technical staff /worker of the day OSCA Officer and Senior Citizen Federation President

			<ul style="list-style-type: none">➤ Fill-up ID card and purchase booklet and facilitate to LCEs signature then issue and release ID membership card	Elderly persons or duly representative	40 minutes	8:00 a.m.-5:00 p.m. Monday to Friday	
--	--	--	---	--	------------	---	--