

OFFICE OF THE REGIONAL DIRECTOR FIELD OFFICE X

DSWD-AS-GF-068 | REV 01 | 07 OCT 2022

FREEDOM OF INFORMATION (FOI) REQUEST FORM

Pursuant to Executive Order No. 2 dated July 23, 2016 on Freedom of Information (FOI), I respectfully request the following information from the Department of Social Welfare and Development (DSWD):

DESCRIPTION OF INFORMATION REQUESTED (e.g. title of document, periods covered, etc.)		
PURPOSE FOR THE REQUEST		
FORM		□ Photocopy □ Digital Copy
REQUESTING PARTY	NAME	
	COMPLETE ADDRESS	
	CONTACT NOS. / EMAIL ADDRESS	
	PROOF OF IDENTITY (preferably Government ID)	
	SIGNATURE	
TO BE FILLED OUT BY THE FOI RECEIVING OFFICER (FOCAL / ALTERNATE)		
DATE AND TIME OF RECEIPT		
NAME OF RECEIVING OFFICER		
SIGNATURE OF RECEIVING OFFICER		

NOTE:

- 1. Please make sure that the information requested is not already publicly available by first checking these websites foi.gov.ph, data.gov.ph and dswd.gov.ph.
- 2. Please submit a photocopy (back to back) of the I.D. presented (preferably Government ID).

