Republic of the Philippines DEPARTMENT OF LABOR AND EMPLOYMENT Bureau of Labor Relations

WORKERS ORGANIZATION AND DEVELOPMENT PROGRAMS (WODP)

ISABELO DELOS REYES (IDR) SCHOLARSHIP GRANTS

For more information, please call: (02)527-25-37; (02)527-25-35; (02)527-24-59 or write/visit us at 6^{th} Floor BF Condominium, Solana Street, Intramuros, Manila

Republic of the Philippines DEPARTMENT OF LABOR AND EMPLOYMENT

ISABELO DELOS REYES (IDR) SCHOLARSHIP

(For legitimate dependent/children of officers & members)

CHECKLIST OF REQUIREMENTS

| Application Form | (WODP IDR Scholarship Form No.1) |
|---|--|
| Profile of Scholars | (WODP IDR Scholarship Form No.2) |
| Two 1x1 pictures of the applicants s | scholar |
| Original and Xerox copy of the lates | st income tax return (ITR) of the parents |
| Certification from the labor organizemember of the organization | ation that the parent-officer/member is a bonafide |
| Original and Xerox copy of high scl 80 or higher in 4 th year high school | nool diploma or report card with a general average of |
| Certified Xerox copy of the birth ce number | rtificate of applicant scholar with local civil registry |
| Certificate of good health by govern | nment physician |
| Certificate of good moral character | issued by the school principal or guidance counselor |
| Duly accomplished application form (to be furnished by the BLR/LRD) | n by the applicant-scholar |

Republic of the Philippines DEPARTMENT OF LABOR AND EMPLOYMENT BUREAU OF LABOR RELATIONS

ISABELO DELOS REYES (IDR) SCHOLARSHIP

(For legitimate dependent/children of officers & members)

APPLICATION FORM

I wish to apply for Isabelo delos Reyes (IDR) scholarship grant under the Workers Organization Development Program (WODP) component:

Officers/Members Information:

| Name of Local/Chapter: | | | |
|--|----------------|-----------------------|---------------------------------------|
| Independent Union: | | | |
| Address/Tel. No.: | | | |
| Name of Federation if affilia | | | |
| Address/Tel. No.: | | | |
| Name of Officer/Member: | | | |
| | (Last Name) | (First Name) | (Middle Name) |
| Birthdate: | Age: | Gender: | · · · · · · · · · · · · · · · · · · · |
| Civil Status: | | | |
| Address: | | | |
| Applicant's Information Name of Applicant: | | | |
| Birthdate: | | | |
| Civil Status: | | Tel. No.: | |
| EDUCATIONAL ATTAIN | MENT (attached | other supporting docu | ments) |
| Name of Elementary School: | | Yea | r Graduated: |
| Name of Secondary School: | | Year | Graduated: |
| Vocational/Technical course | if any: | | |
| Name of School: | | | |
| Inclusive dates of attendance | : | | |

| Have you availed of any training /scholarship grant? Yes: If yes, what office/agency assisted you? | |
|--|-----------------------------|
| Course you plan to take-up: | |
| School you plan to enroll at: | |
| Why do you choose this course? | |
| | |
| | |
| | |
| | Signature over printed name |
| Date Accomplished: | |

Republic of the Philippines DEPARTMENT OF LABOR AND EMPLOYMENT

ISABELO DELOS REYES (IDR) SCHOLARSHIP

(For legitimate dependent/children of officers & members)

PROFILE OF SCHOLAR

| Name: | | | |
|-----------------|----------------------|----------|-----------------------------------|
| Address: | | | |
| Age: | | | |
| | Male: | | Female: |
| Civil Status: _ | | | |
| | | | |
| Educational B | ackground: | | |
| | | | Name of School/College/University |
| | Elementary Level | | |
| | High School Level | | |
| | High School Graduate | | |
| [] C | College Level | | |
| | r r ' . | | |
| Employment I | Aistory: | | |
| Inclusi | ive Dates | Position | Employer |
| metusi | ve Dates | Position | Employer |
| | | | |
| | | | |
| | | | |
| Training/Semi | inar Experience: | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | Signature over printed Name |
| | | | |
| Date Accompl | lished: | | |
| - | | | |

IDR SCHOLARSHIP QUESTIONNAIRE

| NAM | E OF SCHOLAR: | | |
|-----|---|--|--|
| ADD | RESS: | | |
| NAM | E OF MEMBER-WORKER: | | |
| | Please answer these questions with utmost honesty. You are assured that the information vill give shall be for your benefit and shall be deemed confidential. | | |
| 1. | What are your reasons for applying for a scholarship? | | |
| | [] To be able to continue my studies [] For self-improvement [] For better opportunity after graduation [] Other reasons | | |
| 2. | Why did you choose as your course? | | |
| | [] It is my field of interest [] It is related to my present job [] The knowledge I will get from the course could be of help to my union [] Other reasons | | |
| 3. | Are you willing to support the Program if your acquired knowledge and skills from the scholarship are needed in the future? | | |
| | [] Yes [] No | | |
| | How will you do so? | | |
| | | | |
| 4. | Where do you intend to work after you finished the course? | | |
| | [] Join the union [] Find work in other local company [] Put up own business/company [] Find work abroad [] Others | | |

| | Signature over printed nam |
|--|----------------------------|
| | |
| | |