



Republic of the Philippines  
**City of Las Piñas**  
 OFFICE OF THE MAYOR

1 X 1  
 PHOTO

**LAS PIÑAS CITY HOSPITALIZATION SUPPORT PROGRAM (LPCHSP)**  
**A P P L I C A T I O N F O R M E M B E R S H I P**

REV. 01-03-19

FIRST NAME		MOTHER'S SURNAME		FATHER'S SURNAME		HUSBAND'S SURNAME	
VOTER REGISTRATION RECORD (VRR) NO. V.I.N.				DATE	PRECINCT NO.	BARANGAY	
CITY ADDRESS						TELEPHONE NO. / CELL. NO.	
PROVINCIAL ADDRESS				PLACE OF BIRTH		DATE OF BIRTH	
CIVIL STATUS		SEX	OCCUPATION / PROFESSION			RELIGION	
PLACE OF MARRIAGE		DATE		DO YOU OWN RESIDENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO	MONTHLY RENTAL	STAYING WITH	
IF EMPLOYED, NAME & ADDRESS OF EMPLOYER						TELEPHONE NO.	
PRESENT POSITION						MONTHLY SALARY	
FOR OWN BUSINESS (AND/OR SPOUSE), TRADENAME OF COMPANY AND ADDRESS						TELEPHONE NO.	
NATURE OF BUSINESS						MONTHLY INCOME	
FIRST NAME OF SPOUSE		MOTHER'S SURNAME		FATHER'S SURNAME		HUSBAND'S SURNAME	
VOTER REGISTRATION RECORD (VRR) NO. V.I.N.		DATE		PRECINCT NO.		BARANGAY	
IF EMPLOYED, NAME & ADDRESS OF EMPLOYER						TELEPHONE NO.	
PRESENT POSITION						MONTHLY SALARY	
NAME OF UNMARRIED CHILDREN		SEX	DATE OF BIRTH (MM/DD/YY)	AGE	VOTER REGISTRATION RECORD (VRR) NO. V.I.N. (For 21 years old and above)	PRECINCT NO.	
1.							
2.							
3.							
4.							
5.							
6.							
7.							
<b>EDUCATIONAL BACKGROUND</b>							
ELEMENTARY / ADDRESS						YEAR GRADUATED	
HIGH SCHOOL / ADDRESS						YEAR GRADUATED	
VOCATIONAL / ADDRESS						YEAR GRADUATED	
CERTIFICATE OBTAINED: COLLEGE / ADDRESS						YEAR GRADUATED	
COURSE TAKEN / DEGREE / MAJOR:							

Barangay Certificate / Clearance No. \_\_\_\_\_  
 Barangay \_\_\_\_\_ Date \_\_\_\_\_  
 Issuing Official \_\_\_\_\_

PROCESSED BY:

\_\_\_\_\_  
 SOCIAL WORKER

**R E Q U I R E M E N T S**

1. Photocopy of Voter Registration Record (VRR) / Voter's ID (VIN)
2. Photocopy of Certificate of Marriage, if married
3. Photocopy of Birth Certificate of unmarried children.
4. Photocopy of Voter Registration Record (VRR) / Voter's ID (VIN) of unmarried children 21 yrs old and over.
5. Barangay Certificate / Clearance (for Greencard)
6. 2 pcs. identical 1 x 1 photo taken within (1) year
7. Photocopy of Community Tax Certificate (CEDULA)

I hereby certify that all the above information are true and correct to the best of my knowledge.

\_\_\_\_\_  
 APPLICANT'S SIGNATURE

GREEN CARD NO. \_\_\_\_\_

ISSUED ON \_\_\_\_\_

**JUNET M. BARILLA, RSW**  
 City Social Welfare & Development Officer

/vat