



**Philippine National Volunteer  
Service Coordinating Agency**  
NEDA Complex, EDSA, Diliman, Quezon City  
Tel. Nos: 3851729/3810559 Telefax: 4357999  
Email Address: pps.pnvsca@yahoo.com

**REQUEST FOR EXTENSION OF  
VOLUNTEER ASSIGNMENT**

*(To be submitted two (2) months before end of  
volunteer assignment)*

Reference No. \_\_\_\_\_

- 
1. Name and Address of Host Organization: \_\_\_\_\_  
\_\_\_\_\_
  2. Name of Volunteer: \_\_\_\_\_
  3. Project Title and Location: \_\_\_\_\_
  4. Initial Duration of Volunteer Assignment: \_\_\_\_\_
  5. Period of Extension Requested: \_\_\_\_\_
  6. Reasons for Requesting Extension: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Prepared by :

\_\_\_\_\_  
*Printed Name and Signature of  
Program /Project Supervisor*

Concurred:

\_\_\_\_\_  
*Signature of Volunteer*

Submitted by:

\_\_\_\_\_  
*Printed Name and Signature of  
Head of Organization*

\_\_\_\_\_  
*Signature of Head of FVO*

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

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

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**ACTION TAKEN BY PNVSCA**

\_\_\_\_\_  
Date

**JOSELITO C. DE VERA**  
Executive Director