



REPUBLIC OF THE PHILIPPINES  
NATIONAL ECONOMIC AND DEVELOPMENT AUTHORITY

## PHILIPPINE NATIONAL VOLUNTEER SERVICE COORDINATING AGENCY

### Guide to Local Partner Institutions for Completing the PNVSCA Request for Volunteer Form

1. Type all entries and answer all items by providing the requested information or checking the appropriate boxes. Write **N/A** for items that are not applicable. Only complete and properly filled requests will be processed.
2. The current PNVSCA International Volunteer Service Organization (IVSO) partners are: *Australian Volunteers Program (AVP); Forum Civil Peace Services (Forum ZFD); France Volontaires (FV); German Agency for Technical Cooperation (GIZ); Global Initiative for Exchange & Development, Inc. (GIED); Japan International Cooperation Agency (JICA); Korea International Cooperation Agency (KOICA); Organization for Industrial, Spiritual & Cultural Advancement (OISCA); United Nations Volunteer (UNV); United States Peace Corps (USPC); and Voluntary Service Overseas Philippines (VSOP).*
3. Submit one Request for Volunteer (RfV) per project. If the project requires two (2) or more volunteers, submit one (1) work and financial plan per volunteer.

**For non-profit/non-government organization** requesting for volunteers for the first time, submit e-copy of the Certificate of Registration with the Securities and Exchange Commission (SEC), Articles of Incorporation and By-laws and Certificate of Registration or Accreditation with concerned government agency such as DSWD, DTI, CDA, DepEd, TESDA, CHED

4. Ensure that the names, designation, and signatures of the officials submitting the RfV are complete and accurate. The RfV must be submitted by the following as signatories:

National Government Agency	Head of Agency, i.e. Department Secretary, or authorized representative not lower than a Director
Local Government Unit	Provincial Governor, Municipal or City Mayor
Academic Institution	President or equivalent highest official
Non-Government Organization	Highest executive officer, i.e. Chief Executive Officer, President, Executive Director

5. The RfV must be accompanied by a formal letter of request addressed to:  
**MR. DONALD JAMES D. GAWE**  
Executive Director  
Philippine National Volunteer Service Coordinating Agency  
G/F Sugar Center Building, North Avenue, Diliman, Quezon City
6. Send letter and RfV by mail to the above address or email scanned copies of the original documents to [international@pnvsca.gov.ph](mailto:international@pnvsca.gov.ph). Submission of original signed documents will be highly appreciated.
7. For more information, please email [international@pnvsca.gov.ph](mailto:international@pnvsca.gov.ph) or visit the PNVSCA website at [www.pnvsca.gov.ph](http://www.pnvsca.gov.ph).

*Thank you for your interest to be a partner in the volunteer service program.*



G/F, Sugar Center Bldg., North Avenue, Diliman, Quezon City  
Tel. No.: (632) 8927-6847 Cellphone No.: (+63)916 2034322  
Email address: international@pnvsca.gov.ph

**REQUEST FOR  
VOLUNTEER**

Ref. No. \_\_\_\_\_

**A. GENERAL INFORMATION ON REQUESTING LOCAL PARTNER INSTITUTION**

1. Name of Requesting Local Partner Institution (LPI):

\_\_\_\_\_

2. Address: \_\_\_\_\_

*(Unit Number, Building Floor, Street, Barangay)*

\_\_\_\_\_

*(City/Municipality)*

*(State/ Province, Region)*

Tel. No. \_\_\_\_\_

Fax No. \_\_\_\_\_

Website: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

3. Type of Organization

- National Government Agency
- Academic Institution
  - Public*
  - Private*
- International Organization

- Non-Profit/Non-Government Organization
- Local Government Unit
  - Provincial Government*
  - Municipal/City Government*

4. Mandate:

**B. PROJECT/ACTIVITY TO BE ASSISTED BY THE VOLUNTEER**

5. Title of the Project/Program:

6. Objective:

7. Location:  Same as LPI Address       Different from LPI Address *(please fill in the blank below)*

*(Unit Number, Building Floor, Street, Barangay)*

*(City/Municipality)*

*(State/ Province, Region)*

8. Sector:
- Agriculture & Fishery
  - Industry and Services
  - Governance & Public Admin.
  - Science, Tech, & Innovation
  - Education
  - Health
  - Peace & Security
  - Culture & Values
  - Environment
  - Social Services
  - Safety & Resilience

9. Target Beneficiaries:  Senior Citizens       Women and children  
 Youth       Others, pls. specify \_\_\_\_\_

10. Budget and sources of funds: \_\_\_\_\_

11. Status of the project/activity as of the time of volunteer request:
- Conceptualization/Initiation Phase
  - Planning Phase
  - Implementation Phase (ongoing)
  - Closure Phase

12. Duration of volunteer assistance requested: \_\_\_\_\_

**C. DESCRIPTION OF VOLUNTEER REQUESTED**

13. Description of Volunteer/s Requested

Field of Specialization	Preferred Qualification			No. of Vols. Needed	Preferred date of Arrival
	Education	Experience and Training	Vol. Sending Organization		

14. Proposed Volunteer's Work Plan (*Please use additional sheet, if necessary*)

Project Objectives (1)	Expected Output/s of Volunteer Assistance (2)	Volunteer Activities to achieve Outputs in Column 2 (3)	Implementation Period (4)	Funding Allocation (5)

Objectives of Volunteer Assignment (1)	Expected Output/s of Volunteer Assistance (2)	Volunteer Activities to achieve Outputs in Column 2 (3)	Implementation Period (4)	Funding Allocation (5)

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**D. SUPPORT TO BE PROVIDED TO THE VOLUNTEER:**

15. Technical and administrative support:

- Facilities, equipment, and supplies       Housing  
 Transport for project related travel       Emergency / medical assistance  
 Others, pls. specify \_\_\_\_\_

16. Project management team:

- Supervisor      Name: \_\_\_\_\_  
 Position: \_\_\_\_\_  
 Contact/Cellphone No/s.: \_\_\_\_\_  
 E-mail address: \_\_\_\_\_

Prepared by:

Submitted by:

\_\_\_\_\_  
Signature over printed name of Project Supervisor

\_\_\_\_\_  
Signature over printed name of LPI Head

\_\_\_\_\_  
Designation

\_\_\_\_\_  
Designation

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

**ACTION TAKEN BY PNVSCA (for PNVSCA use only)**

- Approved/Endorsed to \_\_\_\_\_  
 Deferred due to \_\_\_\_\_  
 Disapproved due to \_\_\_\_\_

**DONALD JAMES D. GAWE**  
Executive Director

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