



## NOMINATION FORM

This is to officially nominate the family of OFW \_\_\_\_\_,  
a resident of \_\_\_\_\_,  
presently working/ has worked in \_\_\_\_\_ from  
\_\_\_\_\_ to \_\_\_\_\_ as our official entry to the  
2011 MODEL OFW FAMILY OF THE YEAR AWARDS (MOFYA)

\_\_\_\_\_  
Name and Signature of Authorized Representative

\_\_\_\_\_  
Position

\_\_\_\_\_  
Organization



## INFORMATION SHEET

### I. Personal Information on the Nominee

Last Name	First Name	Middle Name
Date of Birth: _____ Place of Birth: _____		
Age: _____ Sex: _____ Civil Status: _____		
Citizenship: _____ Height: _____ Weight: _____		
Residential Address: _____		
Tel. No. (____) _____ Mobile No.: _____ Email: _____		

### II. Family Background

Name of Spouse (if married):

Last Name	First Name	Middle Name
Date of Birth: _____ Place of Birth: _____		
Age: _____ Highest Educational Attainment: _____		
Occupation: _____ Employer's Name: _____		
Business Address: _____		
Tel. No. (____) _____ Mobile No.: _____ Email: _____		
If single:		
Father :		
Date of Birth: _____ Place of Birth: _____		
Age: _____ Highest Educational Attainment: _____		
Occupation: _____ Employer's Name: _____		
Business Address: _____		
Tel. No. (____) _____ Mobile No.: _____ Email: _____		

Mother : \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Age: \_\_\_\_\_ Highest Educational Attainment: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer's Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Tel. No. (\_\_\_\_) \_\_\_\_\_ Mobile No.: \_\_\_\_\_ Email: \_\_\_\_\_

**III. Dependents (please refer to III-A)**

**IV. Work Experience**

Inclusive Dates	Position	Company	Country	Status of Appointment	Salary per Month

**V. Voluntary Work or Involvement in Civic / NGO/ Community Organization**

Name a& Address of Organization	Status of Involvement		Position/ Nature of Work
	Active	Inactive	

**VI. Other Fields of Interest**

Special Skills/Hobbies	Non-Academic/Academic Distinction/Recognition	Membership in Organization

**VII. Business Ownership**

Trade/Business Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Tel. No. \_\_\_\_\_ Email : \_\_\_\_\_  
Initial Capital Interest: \_\_\_\_\_ Est. Monthly Income: \_\_\_\_\_  
Present Capital Interest: \_\_\_\_\_ No. of Years in Business: \_\_\_\_\_  
Number of Employees, if any: \_\_\_\_\_

**VIII. Other Sources of Income**

Other Sources of Income	Estimated Income/Amount

**IX. Other Information**

1. Have you ever been formally charged of any administrative, civil or criminal case?	___ yes ___ No If yes, give details:
2. Have you ever been guilty of any administrative offense?	yes ___ No If yes, give details:
3. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by council or tribunal?	yes ___ No If yes, give details:

<p>4. Have you ever been separated from the service in any of the following modes: dropped from the rolls, dismissal, AWOL, termination in the public or private sector?</p>	<p>yes      ___ No</p> <p>If yes, give details:</p>
<p>5. Has any member of your immediate family ever been formally charged of any administrative, civil or criminal case?</p>	<p>yes      ___ No</p> <p>If yes, give details:</p>
<p>6. Has any member of your immediate family ever been charged of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p>yes      ___ No</p> <p>If yes, give details:</p>
<p>7. Do you have any application for citizenship in another country?</p>	<p>yes      ___ No</p> <p>If yes, give details:</p>

***I declare under oath that this nomination form has been accomplished by me, and the information herein are true, correct and complete to the best of my knowledge. I hereby authorize the representative of MOFY Secretariat to verify/validate the contents stated herein. I trust that all information contained here shall remain confidential.***

_____ Community Tax Certificate No.
_____ Place of Issue
_____ Date of Issue

10 photos taken within six months
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Right thumb mark
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_____ Signature over printed Name
_____ Date of accomplished