



## DepEd – DIVISION OF QUEZON

Sitio Fori, Brgy. Talipan, Pagbilao, Quezon  
Cell # 09175824627 or at [www.depedquezon.com.ph](http://www.depedquezon.com.ph)  
"Creating Possibilities, Inspiring Innovations"

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### DIVISION ADVISORY No. 32, s. 2018 May 4, 2018

In reference to the letter of *Regional Development Council, Region IV-A (CALABARZON)*, this advisory is issued for the information of all School Heads (public and private)

#### Search for Outstanding Volunteer

Respectfully referred to all interested participants the hereto attached letter of Regional Development Council, Region IV-A (CALABARZON) for your information.

For more information, please see attached letter.

**MERTHEL M. EVARDOME, CESO VI**  
Schools Division Superintendent

sdsacc05/04/2018

DEPEDQUEZON-TM-SDS-04-011-000

DEPED - QUEZON ICT UNIT	
<b>UPLOADED</b>	
Date/Time:	<u>MAY 07 2018 4:06</u>
By:	<u>Gian</u>
Ref. no.	_____

Email address: [quezon@deped.gov.ph](mailto:quezon@deped.gov.ph)

Comments: **Txt HELEN** – 09178902327 (Smart/Sun/TalknTxt) 2327 (Globe and TM)  
Cell No: 09175824629





Republic of the Philippines

**Regional Development Council**  
Region IV-A (Calabarzon)

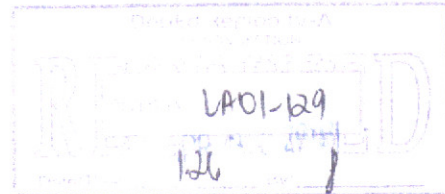
**SEARCH FOR OUTSTANDING VOLUNTEER  
REGIONAL SEARCH COMMITTEE**

*All SDSS,  
For your information  
and appropriate action, pls.  
Thanks,  
Am 4-30-18*

April 16, 2018

Ref. No. RA-0253

**MR. DIOSDADO M. SAN ANTONIO**  
Regional Director  
Department of Education IV-A  
Gate 2 Karangalan Village, Cainta, Rizal



Dear Director San Antonio:

This refers to the Search for Outstanding Volunteers (SOV) for 2018, an annual activity of the Philippine National Volunteer Service and Coordinating Agency in coordination with the NEDA Regional Offices. The SOV aims to recognize and award the outstanding performance and dedication of Filipino volunteers in building strong resilient communities across the country.

In this regard, may we request your assistance in nominating volunteer individuals, organizations or local chapters of foreign volunteer organizations from among your partners, clients and other interested parties. The guidelines on the SOV can be downloaded from the webpage [http://www.pnvsca.gov.ph/sov/sov\\_about.php](http://www.pnvsca.gov.ph/sov/sov_about.php) for reference.

Attached are the nomination forms to be accomplished by the nominating agency/local government unit. Please submit the accomplished forms to our office **not later than June 15 (Friday)** either through facsimile number (049)545-7756 or email address [pmedneda4a@gmail.com](mailto:pmedneda4a@gmail.com).

Our staff, Mr. Ray Michael Kevin Abuso, will coordinate with you regarding this request.

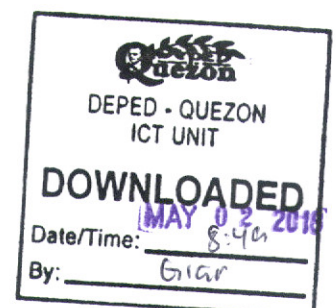
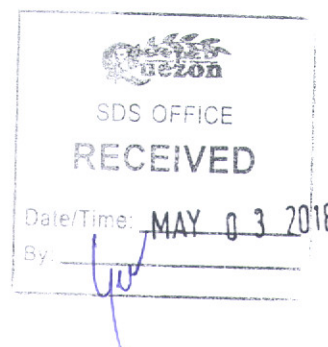
Thank you and best regards.

Very truly yours,

**LUIS G. BANUA**  
SOV-RSC Chairperson

PMED/mka

4/F 2560 Marcelita Building, National Highway, Brgy. Real, Calamba City, Laguna 4027  
Telefax: 049 545-7756 | 049 545-0091 • E-mail: [rde.calabarzon@gmail.com](mailto:rde.calabarzon@gmail.com)  
<http://nro4a.neda.gov.ph>





# SEARCH FOR OUTSTANDING VOLUNTEERS 2018



## NOMINATION FORM – INDIVIDUAL CATEGORY

Sub-Category: ☐ Youth  
☐ Adult  
☐ VLAA

### I. Nominee's Profile:

1. Name of Volunteer:		
2. Date of Birth:	3. Age:	
4. Permanent Address:		
5. Telephone No.:	Fax No.:	6. Email:
Mobile Number:		
7. Name/s and Address/es of Volunteer Organization/s the nominee is presently affiliated:		
8. Duration of volunteer engagement: From _____ to _____		
9. Occupation/Source of Income:		

### II. Describe the nominee's reason/s and motivation for volunteering:

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### III. Describe the nominee's personal, professional and social behaviors in the home, workplace and community. Has the nominee been charged, convicted or has pending administrative, civil or criminal case in court or in any concerned agency/organization?

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SERVICE COORDINATING AGENCY

### IV. What are the most significant accomplishment/s of the nominee in his/her volunteer work? Why are these significant?



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**V. Summary of Volunteer Work:** *(Include ONLY those directly attributed to the nominee. Use additional sheets as needed.)*

Project/Activity	Duration	Target groups/ beneficiaries	Outputs and/or Outcomes <i>(include projects initiated, innovations introduced, resources generated, volunteers mobilized, etc.</i>	Partner institutions/ Contact Persons and Telephone/ Email

Submitted by:

Name and Signature:	
Designation:	
Name and Address of Organization	
Home Address:	
Tel No./Fax No./Mobile No.	
Email:	



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# SEARCH FOR OUTSTANDING VOLUNTEERS 2018



## NOMINATION FORM – ORGANIZATION CATEGORY

Sub-Category: ☐ Not-for-Profit  
☐ Corporate  
☐ VLAA

### I. Nominee's Profile:

1. Name of Organization:	
2. Date organization was established:	
3. Head of Organization:	4. Designation:
5. Permanent Address:	
6. Telephone No.	Fax No.:
7. Email:	
8. SEC Registration No.	9. Date of SEC registration:
10. Duration of organization's volunteering engagement: From _____ to _____	
11. Source of Fund:	

### II. What are the organization's vision, mission and goals and its rationale for implementing its volunteer program/s and activity/ies?

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### III. Describe the organization's status in the community. Has the organization been charged, convicted or has pending administrative, civil or criminal case in court or in any concerned agency/organization?

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SERVICE COORDINATING AGENCY

- IV. What are the most significant accomplishment/s of the organization in its volunteer services? Why do you say that these are significant?

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- V. **Summary of Volunteer Work:** (Include ONLY those directly attributed to the organization. Use additional sheets as needed.)

Project/Activity	Duration	Target groups/ beneficiaries	Outputs and/or Outcomes (include projects initiated, innovations introduced, resources generated, volunteers mobilized, etc.	Partner institutions/ Contact Persons and Telephone/ Email

Submitted by:

Name and Signature:	
Designation:	
Name and Address of Organization	
Home Address:	
Tel No./Fax No./Mobile No.	
Email:	



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