15. SOCIAL WELFARE AND DEVELOPMENT OFFICE EXTERNAL SERVICE



A. ASSISTANCE TO INIDIVIDUAL IN CRISIS SITUATION

It is the provision of limited assistance, in cash or in kind, to individuals/families who are hampered to function normally because of socio-economic difficulties. The nature of difficulty is usually short term and emergency in nature, thus the assistance is on a one shot deal basis.

Office or Division:	SOCIAL WELFARE AND DEVELOPMENT OFFICE			
Classification:	Simple			
Type of Transaction:	G2C- Governr	ment to Citizen		
Who may avail:	Patients or the	eir immediate family member		
CHECKLIST OF REQU	JIREMENTS	WHERE TO SECURE		
Barangay Indigency (1 o	riginal)	Barangay Hall		
Letter of request address Municipal Mayor	sed to	To be accomplished by client		
Photocopy of client's ID		To be accomplished by client		
Photocopy of ID (patient and the immediate family who's requesting the assistance)		To be accomplished by client		
*for medical assistance				
Medical Abstract or Med (1 original, 1 photocopy)		Hospital/ Physician		
*for medical assistance (payment of hospital bill, medical procedure/treatment, professional fee)				
Hospital bill (1 original, 1	photocopy)	Hospital		
*for medical assistance				
Protocol of dialysis or chemotherapy		Hospital		
*for patients requesting for assistance for dialysis or chemotherapy				
Certificate of Registratio	n	School Registrar		
*for educational assistan	ice			

Statement of Ac	count	School Acc	counting Office		
*for educational assistance					
School ID (1 pho	School ID (1 photocopy)		mplished by clier	nt	
*for educational	assistance				
Funeral Contrac	t	Funeral Se	ervice Provider		
(balance indicate	ed; 1 original)				
*for burial assist	ance				
Death Certificate	e (1 photocopy)	Municipal F	Registrar		
*for burial assist	ance				
Prescription of m	nedicines	Physician			
(1 original, 1 pho	(1 original, 1 photocopy)				
*for medical ass	istance				
Laboratory reque	est and quotation	Diagnostic center, hospital, physician			
(1 original, 1 pho	otocopy)				
CLIENT	AGENCY ACTION	FEES TO	PROCESSING	PERSON	
STEPS		BE PAID	TIME	RESPONSIBLE	
1. Submit complete	Evaluate documents	none	2 minutes	Clerk	
requirements.	submitted.			(MSWD Office)	
	2. Conduct interview	none	15 minutes	Clerk	
	and assessment of client.			(MSWD Office)	
	3. Endorse to	none	3 minutes	Clerk	
	Budget Office for processing of voucher.			(MSWD Office)	
	TOTAL:	none	20 minutes		

Processing and releasing of financial assistance is courtesy of Municipal Treasurer's Office

B. BURIAL ASSISTANCE FOR SENIOR CITIZENS

Provision of 5,000 financial assistance to the immediate family of deceased senior citizen.

Office or Division:		SOCIAL WELFARE AND DEVELOPMENT OFFICE			
Classification:		Simple			
Type of Transaction	n:	G2C- Governm	ent to Citi	zen	
Who may avail:		Immediate fam	ily membe	er of deceased se	nior citizen
CHECKLIST OF	REQU	JIREMENTS		WHERE TO SE	CURE
Original and Photocissued in Pulilan	opy of	senior's ID	To be ac	complished by cl	ient
Photocopy of valid I who's requesting the	•	•	To be ac	complished by cl	ient
Death Certificate (2 and back)	photo	copies, front	Municipal Registrar		
CLIENT STEPS	AGE	NCY ACTION	ON FEES PROCESSING PERSON TO BE TIME RESPONSIB PAID		
Submit requirements to Mayor's Office.	1.	Check completeness of documents.	none	5 minutes	Clerk (MSWDO)
info logb forw Bud Offic		Record information to logbook and forward to Budget Office.	none	5 minutes	Clerk (MSWDO)
		TOTAL	none	10 Minutes	

• Processing and release of burial assistance is courtesy of Municipal Treasurer's Office.

C. CASE MANAGEMENT (SPECIAL CASES)

It is a collaborative process of assessment, planning, facilitation and advocacy for options and services to meet an individual's holistic needs through communication and available resources to promote quality cost-effective outcomes. Clients who seek assistance usually fall under VAWC (Violence Against Women and Their Children), Child Abuse, WEDC (Women in Especially Difficult Circumstances), CNSP (Children in Need of Special Protection), CAR (Child at Risk) and CICL (Children in Conflict with the Law).

Office or Division:	SOCIAL WELFARE AND DEVELOPMENT OFFICE			
Classification:	Highly Technical			
Type of Transaction:	G2C- Government to	Citizen		
Who may avail:	All			
CHECKLIST OF RE	QUIREMENTS		WHERE TO S	ECURE
Blotter report from barang applicable	ay (1 photocopy) *if	Barangay	/ Hall	
Referral letter			erring agency (
*if applicable		· .	/, or other gove ent institutions)	ernment and non-
Marriage certificate of parents (1 photocopy) *for child custody issues		PSA		
Birth certificate of minor (1 photocopy) *for child support concerns		PSA		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
Request for assistance from social worker or clerk.	Check completeness of documents.	none	10 minutes	Social Worker or Clerk (MSWD Office)
Answer questions, clarifications of social worker or clerk to complete assessment.	Conduct interview and assessment of client and family as needed.	none	30 minutes	Social Worker or Clerk (MSWD Office)
Participate in decision- making and planning of interventions.	3. Discuss options with clients and prepare intervention plan. Provide counseling	none	10 minutes	Social Worker or Clerk (MSWD Office)
	TOTAL:	none	50 minutes	

D. CERTIFICATION

Some services needed by clients are provided by other organizations. One requirement is a certification from MSWD Office that such client is an indigent needing the services of a Public Attorney's Office. In some cases, a certificate of guardianship is required in order for a minor to avail services or programs in the absence of their parents.

Office or Division:	SOCIAL WELFARE AND DEVELOPMENT OFFICE				
Classification:	Simple				
Type of Transaction:	G2C- Government to Citizen				
Who may avail:	Residents of Pulilan				
CHECKLIST OF F	REQUIREMENTS		WHERE TO SE	CURE	
Barangay Indigency (1or *for certificate of indigen		Barangay	Hall		
Birth certificate of childre *for certificate of guardia		PSA			
Guardian's valid ID (1 ph	notocopy)	To be acc	complished by the cl	ient	
Affidavit of Guardianship	(1 original)	Notary Pu	blic		
circumstances of the mir	Certification from barangay indicating the circumstances of the minor *for certificate of guardianship		Barangay Hall		
Death certificate of parer	nts (1 photocopy)	Local Civil Registry			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Submit requirements to clerk.	Check completeness of documents.	none	2 minutes	Clerk (MSWD Office)	
Answer questions, clarifications of clerk to complete assessment.	Conduct interview and assessment of client.	none	10 minutes	Clerk (MSWD Office)	
	Prepare and sign certification	none	3 minutes	Social Worker or Clerk (MSWD Office)	
	Release the certification	none	1 minute	Social Worker or Clerk (MSWD Office)	
_	TOTAL:	none	16 Minutes		

E. ISSUANCE OF ASSESSMENT REPORT FOR TRAVEL CLEARANCE

Travel Clearance is a permit issued by the Department of Social Welfare and Development for a minor who is below 18 years old, travelling alone or with an adult other than a parent.

Office or Division:	SOCIAL WELFARE AND DEVELOPMENT OFFICE				
Classification:	Simple	Simple			
Type of Transaction:	G2C- Government	G2C- Government to Citizen			
Who may avail:	Residents of Pulilar	١			
CHECKLIST OF R	EQUIREMENTS	WHERE TO SECURE			
Accomplished Applica	ation form	MSWD Office			
Birth certificate of min (2 photocopies)	or travelling abroad	PSA			
Marriage certificate of (2 photocopies)	parents	PSA			
CENOMAR (for unma photocopies)	rried mother) (2	PSA			
Notarized Affidavit of Consent from parents person to accompany (2 copies)	authorizing a	Notary Public			
Special Power of Atto of Support and Conse parents from the Philip parents working abroa photocopy)	ent from minor's ppine Embassy (for	Philippine Embassy			
Proof of income of travel sponsor (i.e. certificate of employment, latest ITR, or bank statement) (2 photocopies)		Employer, bank			
Waiver of Liability (for minors travelling alone) (2 photocopies)		Notary Public			
Minor's passport and visa (2 photocopies)		To be accomplished by the client			
Travelling companion visa (2 photocopies)	's passport and	To be accomplished by the client			

Valid IDs of parents (2 photocopies)		To be accomplished by the client			
3 pieces Passport size picture of minor		To be accomplished by the client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Request for travel assessment to MSWD office. Submit requirements to social worker.	Check completeness of documents.	none	5 minutes	Social Worker (MSWD Office)	
2. Answer questions, clarifications of social worker to complete assessment.	2. Conduct interview and assessment of client.	none	30 minutes	Social Worker (MSWD Office)	
	3. Prepare Travel Assessment	none	10 minutes	Social Worker (MSWD Office)	
	4. Release Travel Assessment to client	none	5 minutes	Social Worker (MSWD Office)	
	TOTAL:	none	50 minutes		

F. ISSUANCE OF PWD ID

A PWD ID is a valid identification card issued to persons with disabilities. This card serves as proof for availing benefits and privileges under RA 10754.

Office or Division:	SOCIAL WELFAF	SOCIAL WELFARE AND DEVELOPMENT OFFICE				
Classification:	Simple					
Type of Transaction	: G2C- Government	to Citiz	en			
Who may avail:	Residents of Pulila	an who h	nave disability			
CHECKLIST OF	REQUIREMENTS		WHERE TO S	ECURE		
FOR PWD:		Physic	ian			
Medical Certificate st	ating the disability					
(Original Copy)						
FOR PWD:		Barang	gay Hall			
Certificate of Resider	ncy (Original Copy)					
FOR PWD:		To be a	accomplished by	client		
2 pcs 1 x 1 picture	2 pcs 1 x 1 picture					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Submit required documents	Check completeness of documents.	none	2 minutes	Disability Affairs Officer (for PWD) (MSWD Office)		
2. Submit self to interview and assessment.	Interview and assess the client. Prepare ID.	none	2 minutes	Senior Citizens Focal Person (MSWD Office)		
	3. Release PWD ID	none	1 minute	Senior Citizens Focal Person (MSWD Office)		
	TOTAL:	none	5 minutes			

G. ISSUANCE OF SOLO PARENTS' ID

Office or Division:

Solo Parent ID is issued to single parents which shall serve as proof in availing benefits and privileges under RA 8972 otherwise known as the SOLO PARENT WELFARE ACT OF 2000.

SOCIAL WELFARE AND DEVELOPMENT OFFICE

Office of Division.		SOCIAL WELFARE AND DEVELOPMENT OFFICE			
Classification:		Simple			
Type of Transaction:		G2C- Government to	Citizen		
Who may avail:		Solo parents who are	residents	of Pulilan	
CHECKLIST O	FREG	QUIREMENTS		WHERE TO SE	CURE
FOR SOLO PARENT:	:		Barangay	Hall	
Barangay Certification * stating the circumsta					
FOR SOLO PARENT: Birth certificate of mind		dren (1 photocopy)	PSA/LCR		
FOR SOLO PARENT:			Local Civi	I Registry	
For widowed: Marriage of the spouse	e contr	act & death certificate			
For annulled: Declarat	ion of	nullity of marriage	Court		
FOR SOLO PARENT: 2 pcs 1 x 1 picture	FOR SOLO PARENT: 2 pcs 1 x 1 picture		To be accomplished by client		
CLIENT STEPS	A	GENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit required documents		eck completeness of cuments.	none	2 minutes	Solo Parent Focal Person (MSWD Office)
Submit self for interview and assessment.	inte	cal Person will erview and assess client.	none	5 minutes	Solo Parent Focal Person (MSWD Office)
3. Leave documents to focal person and return after 1 month to claim ID 3. Focal Person will verify the veracity of documents submitted		none	30 days	Solo Parent Focal Person (MSWD Office)	
Prepare and release ID to solo parent		•	none	2 minutes	Solo Parent Focal Person (MSWD Office)
Delegge of Col		TOTAL:	none	30 days and 10 minutes	

• Release of Solo Parent ID is after one month as per Solo Parents' Act IRR

H. ISSUANCE OF SENIOR CITIZEN'S ID

Senior Citizen's ID is issued to person ages 60 years old and above. This shall serve as proof in availing benefits given to Senior Citizens under RA 9257.

Office or Division:	SOCIAL WELFARE	AND DE	VELOPMENT O	FFICE	
Classification:	Simple	Simple			
Type of Transaction	: G2C- Government t	G2C- Government to Citizen			
Who may avail:	Senior Citizens (res member	Senior Citizens (residents of Pulilan) or their immediate family member			
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE	
FOR SENIOR CITIZE	N:	PSA			
Birth Certificate (Original	nal Copy)				
FOR SENIOR CITIZE	N:	Baranga	y Hall		
Certificate of Residen	cy (Original Copy)				
FOR SENIOR CITIZE	N:	To be accomplished by client			
2 pcs 1 x 1 picture					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Submit required documents	Check completeness of documents.	none	2 minutes	Senior Citizens Focal Person (MSWD Office)	
Submit self to interview and assess the client. Prepare ID.		none	2 minutes	Senior Citizens Focal Person (MSWD Office)	
	3. Release the senior citizens ID	none	1 minute	Senior Citizens Focal Person (MSWD Office)	
	TOTAL:	none	5 minutes		

I. LIVELIHOOD ASSISTANCE

Provision of interest-free capital assistance and livelihood-oriented services to family heads and family members to enable them to engage in income-generating projects and thus develop them to become self-reliant and socially responsible individuals. It is intended for needy family heads and other family members with skills but has no capital to start a livelihood project.

Office or Division:	SOCIAL WEL	SOCIAL WELFARE AND DEVELOPMENT OFFICE			
Classification:	Highly Technic	al			
Type of Transaction	: G2C- Governn	nent to Citiz	zen		
Who may avail:	Residents of P	Residents of Pulilan			
CHECKLIST OF R	REQUIREMENTS		WHERE TO SE	CURE	
Barangay Indigency	(1 original)	Barangay	/ Hall		
Letter of request add Municipal Mayor	ressed to	To be acc	complished by clie	ent	
Photocopy of client's	ID	To be acc	complished by clie	ent	
Photo of client		To be acc	complished by clie	ent	
*background should livelihood project (for					
*background should he/she intends to put (for starting capital)	•				
List of products, mater business with price	erials needed in the	To be accomplished by client			
Sketch of location of	house	To be acc	complished by clie	ent	
CLIENT STEPS	AGENCY ACTION	FEES PROCESSING PERSON TO BE TIME RESPONSIBL PAID			
Submit required documents	1. Check completeness of documents.	none	5 minutes	Clerk/ Livelihood Focal Person (MSWD Office)	

2. Answer questions, clarifications of Clerk to complete assessment.	2. Conduct initial interview and assessment of client.	none	15 minutes	Clerk/ Livelihood Focal Person (MSWD Office)
3. Leave documents to Clerk and wait for the advice from the Clerk when home visit will be conducted	3. Clerk/ Livelihood Focal Person will conduct home visitation to ascertain eligibility of client to livelihood assistance.	none	5 days	Clerk/ Livelihood Focal Person (MSWD Office)
	Submit to MSWDO for approval	none	5 minutes	MSWDO
	TOTAL:	none	5 days and 25 minutes	

• Release of financial assistance to client is courtesy of Municipal Treasurer's Office.

J. PREPARATION OF SOCIAL CASE STUDY REPORT

Social Case Study Reports are required by government organizations, government hospitals, charitable institutions, and non-government organizations that provide services or assistance to clients and patients.

Office or Division:	SOCIAL WELFARE AND DEVELOPMENT OFFICE				
Classification:	Simple				
Type of Transaction:	G2C- Government to Citizen				
Who may avail:	Patients or their immediate family member				
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
Barangay Indigency (1 original, 1 photocopy)		Barangay Hall			
Photocopy of client's ID		To be accomplished by client			
Photocopy of ID (patient and the immediate family who's requesting the assistance) *for medical assistance		To be accomplished by client			
Medical Abstract or Medical Certificate (1 original, 1 photocopy)		Hospital/ Physician			
*for medical assistance (payment of hospital bill, medical procedure/treatment, professional fee)					
Hospital bill (1 original, 1 photocopy) *for medical assistance		Hospital			
Certificate of Registration		School Registrar			
*for educational assistance					
Statement of Account		School Accounting Office			
*for educational assistance					
School ID (1 photocopy)		To be accomplished by client			
*for educational assistance					
Funeral Contract		Funeral Service Provider			
(balance indicated;					
1 original)					
*for burial assistance					

Death Certificate (1 photocopy)		Municipal Registrar			
*for burial assistance					
Prescription of medicines		Physician			
(1 original, 1 photocopy)					
*for medical assistance					
Laboratory request and quotation		Diagnostic center, hospital, physician			
(1 original, 1 photocopy)					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Submit requirements	Check completeness of documents	none	3 minutes	Clerk (MSWD Office)	
Answer questions, clarifications of Clerk to complete assessment.	2. Conduct interview and assessment of client. Preparation and printing of Social Case Study Report	none	15 minutes	Clerk (MSWD Office)	
	3. Release Social Case Study Report to client.	none	2 minutes	Clerk (MSWD Office)	
	TOTAL:	none	20 minutes		

K. PROVISION OF ASSISTIVE DEVICES

Enabling the differently abled individuals by providing wheelchairs and other assistive devices helping them recover from their physical challenges.

Office or Division:	SOCIAL WELFARE AND DEVELOPMENT OFFICE					
Classification:	Simple					
Type of Transaction:	G2C- Government to Citizen					
Who may avail:	Patients or their immediate family member					
CHECKLIST OF	REQUIREMENTS WHERE TO SE			ECURE		
Barangay Indigency (1 original)		Barangay Hall				
Letter of request addressed to Municipal Mayor		To be accomplished by client				
Photocopy of ID (patient and the immediate family who's requesting the assistive device)		To be accomplished by client				
Medical Abstract or N	Medical Certificate	Hospital/ Physician				
(1 original, 1 photocopy)						
Photo of patient requesting assistive device		To be accomplished by client				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Submit requirements to MSWD clerk.	Check completeness of documents.	none	3 minutes	Clerk (MSWD Office)		
2. Answer questions, clarifications of Clerk to complete assessment.	Conduct interview and assessment of client.	none	10 minutes	Clerk (MSWD Office)		
	Release assistive device to client	none	5 minutes	Clerk (MSWD Office)		
	TOTAL:	none	18 minutes			