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Republic of the Philippines

DEPARTMENT OF LABOR AND EMPLOYMENT

REGION VI

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Accreditation of Co-Partner Evaluation Sheet

Application : _____

Name of Organization : _____

Address : _____

Area Manager : _____

Telephone No. : _____

Type of Organization : _____

Date Established : _____

I. Findings:

II. Recommendation:

Evaluator:

Recommending Approval:

(Position)

(Chief or Head)

Date

Recommendation Approved:

Regional Director

Date