

Republic of the Philippines Bangsamoro Autonomous Region in Muslim Mindanao BANGSAMORO ECONOMIC AND DEVELOPMENT COUNCIL



BARMM Compound, Cotabato City Tel. No.: (064) 557-2795 / (064) 557-2797 E-mail Address: bpda@bangsamoro.gov.ph

Form 1: PSO PROFILE SHEET

Name of Organization: Office Address: Telephone: Fax: E-mail: Type of Organization (Check the type that best describes the legal status of the organization) Business Cultural Association Non-government Organization Professional Association People's Organization Civic Club Industry Association Cooperative Religious Organization Others Registration (The government entity which granted legal status to the organization) SEC CR No. Date CDA CR No. Date Date Date Dothers CR No. Date Dothers Accreditation (Check the government agencies that have officially acknowledged your organization for the purpose of program participation and/or eligibility for development assistance. In case of LGU accreditation, fill in the blank) DOLE DENR POPCOM DAR DILG DSWD	GENERAL INFORMATION						
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People's Organization	Business		Cultural A	Association			
Industry Association Cooperative Religious Organization Others	Non-government Orga	anization	Professio	nal Association			
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Others	Others	_					
	Objectives (State the purpos	e/s of the orga	anization):				
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Services, Activities (State major activities of	Services, Activities (State major activities of the organization)						
Target Clientele (Indicate your organization's	s primary clients/beneficiaries)						
Women Street Children	Entrepreneurs Farmers						
Fisherfolks Urban Poor	Youth Laborers						
Others							
Sectoral Concern	Area of Operation (List below the specific areas covered by your organization)						
Agriculture							
Forestry	National						
Fisheries							
Environment							
Trade and Industry	Regional						
Tourism							
Science and Technology							
Education	Provincial						
Manpower and Development							
Health and Family Planning							
Social Welfare	City/Municipal						
Disaster Risk Reduction/CCA							
Housing	Barangay						

Water				
Energy				
Transportation		Sitio _		
Communication				
Others				
	FUNI	DING		
Please list below your organization for which they were spent for the enough.	e period 20	008-2019. Use	opposite side of space if not	
Source	Ar	mount	Purpose	
	PERSC			
Name Chairperson (Board of Trustee)	Citi	zenship	Address	
Members (Board of Trustee)				
Corporate Secretary				
Treasurer				
Chief Executive Office				
No. of Members (Indicate number of members of the organization or stockholders) No. of Office Staff				

Regular Associate Honorary Others *Attach separate sheet for this number of members and staff. PROJECTS			(Indicate number of office and field staff/employees) Office regular Part Time Volunteer Field Regular Part Time Volunteer Volunteer Volunteer			
Please list below important						
Project Title/Description	Location	Funding So	ource	Beneficiaries		
	CERTIFIC	ATION				
I hereby certify that the above are correct information about the organization.						
Name: Designation:		Signature: Date Accomplished:				