



**CONTACT US**

Tel Nos.:  
 Fax No.:  
 Email:  
 Website: www.ppa.com.ph

**ACCESS TO INFORMATION REQUEST FORM**

To be accomplished by the Applicant

1. Name :

2. Residence/Business Address

House No./Blk. No.

Street

Barangay

City/Municipality

3. Proof of Identity:

4. Contact Information

Landline:

Mobile No.:

Valid Email:

5. Detailed description of the information/document requested:

6. Purpose of the request:

7. Name and signature of authorized representative if any:

Proof of identity and/or evidence of authority:

**CERTIFICATION UNDER OATH**

I hereby certify under oath that the undersigned is the person whose name and signature appears here and that the above-requested information will be used for the stated purpose/s and for no other. None of the contents of such document/information will be disclosed to a third party, except the applicant here. I have not misused any information previously obtained from this Office. In case where a study is conducted in line with a school-sanctioned project, the identity of the concerned public officer/s or employee/s shall not be unduly disclosed but shall be referred in general terms (e.g. mayors of Metro Manila) to prevent unnecessary disclosure of information about the public official/s or employee/s. Should I violate the terms of this undertaking, I understand that I will be proceeded against under the Revised Penal Code for perjury.

\_\_\_\_\_  
 Signature over printed name