

#### Philippine Registry For Persons with Disabilities Version 4.0

## **Application Form**

1. O NEW APPLICANT	CANT O RENEWAL*				Place 1"x1" Photo Here			
2. PERSONS WITH DISABILITY NUMBER (RR-PPMM-BBB-NNNNNNN) *				3. DATE APPLIED: * (mm/dd/yyyy)				
4. PERSONAL INFORMATIO	N *							1
LAST NAME: *	FIRS	ST NAME: *	MIDDLE NAME	E: *		SUFFIX: *		
5. DATE OF BIRTH: * (mm/dd/yyyy)  6. SEX: *  O MALE				1ALE	O FEN	IALE		
7. CIVIL STATUS: *								
O Single O Sepa	rated	O Coh	abitation (live-in)		O Marri	ed O W	/idow/e	r
8. TYPE OF DISABILITY: *			, ,	9.	CAUSE O	F DISABILITY: *		
☐ Deaf or Hard of Hearing ☐ Intellectual Disability ☐ Learning Disability ☐ Mental Disability ☐ Physical Disability(Ortho	☐ Speech and ☐ Visual Disal ☐ Cancer(RA1	Psychosocial Disability Speech and Language Impairment Visual Disability Cancer(RA11215) Rare Disease(RA10747)		□ ADHD □ □ Cerebral Palsy □ □ Down Syndrome □		equired Chronic Illness Cerebral Palsy Injury Others, Specify:		
10. RESIDENCE ADDRESS *			·		ı			
House No. and Street:*	Barangay:*		Municipality:*		Provin	ce:*		Region:*
11. CONTACT DETAILS					II.		I	
Landline No.:		Mobile N	0.:			E-mail Address:		
12. EDUCATIONAL ATTAINMENT: * O None O Kindergarten O Elementary O Junior High School  13. STATUS OF EMPLOYMENT: * O Employed O Unemployed O Self-employed		O Coll O Voc O Pos  13 b. TYP O Per O Sea O Cas	O Vocational O Post Graduate  13 b. TYPES OF EMPLOYMENT: * O Permanent / Regular O Seasonal		14. OCCUPATION: * O Managers O Professionals O Technicians and Assor O Clerical Support Work O Service and Sales Woo O Skilled Agricultural, For Workers O Craft and Related Trac O Plant and Machine Op O Elementary Occupation		kers rkers orestry and Fishery de Workers oerators and Assemblers	
13 a. CATEGORY OF EMPLOYN O Government O Private		ergency			O Armed Forces	Occupa		
15. ORGANIZATION INFORMA		Contact Person:	I	Office	Address:		Tal	Nos.:
Organization Affiliated:		Contact Person:		Office	Address:		rei.	NOS.:
16. ID REFERENCE NO.: SSS NO.:	SIS NO.:		AG-IBIG NO.:	- De	SN NO.:		Dh:II	Health NO.:
	) NO			P.		T 31 3 3 4 5	Pilli	
17. FAMILY BACKGROUND: FATHER'S NAME		LAST NA	IVIE		FIRS	T NAME		MIDDLE NAME
MOTHER'S NAME								
GAUARDIAN'S NAME	:							
18. ACCOMPLISHED BY: *		LAST NA	ME		FIRS	T NAME		MIDDLE NAME
O APPLICANT O GUARDIAN								
O REPRESENTATTIVE								
19. NAME OF CERTIFYING PHYSICIAN: LICENSE NO.:								
20. PROCESSING OFFICER: *								
21. APPROVING OFFICER: *								
22. ENCODER: *  23. NAME OF REPORTING UN	IT/OFFICE /S	ECTION) ·*						
24. CONTROL NO.: *	IT(OFFICE/3	LCHON).						



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Instructions for Philippine Registry for Persons with Disabilities (PRPWD) Version 4.0 Form

NO.	FIELD NAME	INSTRUCTION and DEFINATION
1	New Applicant and	Check the appropriate box based on the definition.
_	Renewal	New Applicant: to account the information of the new applicant
		Renewal: for possible update of information of the individual (address, type of disability, contact details, etc.)
2	Registration No.	Region, Province, City/Municipality and Barangay is system-generated number, but the sequential number should be
		assigned by the Issuing Office. Once the Person with Disability report is encoded into the system, copy the system-
		generated number and write into the box of the Application Form.
3	Date Applied	The date when Persons of Disability applied, must be entered on this portion. The format is "mm/dd/yyyy"
4	Personal Information	Write the last name, first name, middle name in the appropriate space provided by the Issuing Office
		Note: Middle name is default to "N/A" because it is a required field. If the Person with Disability have a middle name,
5	Birthdate	remove the "N/A" and write the middle name.  Write the birthdate of the Person with Disability in the format of "mm/dd/yyyy" (e.g. July 1, 1970 should be written
	birtildate	as 07/01/1970). The birthdate should not be later than the current date/registration date.
6	Sex	Check the appropriate circle for the sex of the <i>Person with Disability</i> .
7	Civil Status	Check the appropriate circle for the civil status of the <i>Person with Disability</i> . Not legally separated is still
		considered as "Married"
8	Type of Disability	Check the appropriate box/es for the Type/s of Disability sustained by the <i>Person with Disability</i> . One or
	Type of Disability	more items can be checked for this field.
		<b>Deaf or Hard of Hearing</b> - refers to people with hearing loss, implies little or no hearing/ranging from
		mild to severe. Hearing loss, also known as hearing impairment means the complete or partial loss of the
		ability to hear from one or both ears with 26 dB or greater hearing threshold, averaged at frequencies'
		0.5, 1, 2, 4 kilohertz.
		Intellectual Disability - a significantly reduced ability to understand new or complex information and to
		learn and apply new skills.
		Learning Disability - persons who, although normal in sensory, emotional and intellectual abilities,
		exhibit disorders in perception, listening, thinking, reading, writing, spelling, and arithmetic.
		Mental Disability - disability resulting from organic brain syndrome and or mental illness (psychotic or
		non-psychotic disorder)
		Physical Disability - is a restriction of ability due to any physical impairment that affects a person's
		mobility, function, endurance or stamina to sustain prolonged physical ability, dexterity to perform tasks
		skillfully and quality of life. Causes may be hereditary or acquired from trauma, infection, surgical or
		medical condition and include the following disorders, namely: (1) Musculoskeletal or orthopedic
		disorders (2) Neurological disorders (3) Cardiopulmonary disorders (4) Pediatric and congenital disorders
		Psychosocial Disability - any acquired behavioral, cognitive, emotional or social impairment that limits
		one or more activities necessary to effective interpersonal transactions and other civilizing process or
		activities to daily living such as but not limited to deviancy or anti-social behavior.
		Speech and Language Impairment - mean one or more speech/language disorders of voice, articulation,
		rhythm and/or the receptive and expressive processes of language. <i>Visual Disability</i> - A person with visual disability (Impairment) is one who has impairment of visual functioning even after treatment
		and/or standard refractive correction, and has visual acuity in the better eye of less than (6/18 for low
		vision and 3/60 for blind), or a visual field of less than 10 degrees from the point of fixation. A certain
		level of visual impairment is defined as legal blindness. One is legally blind when your best corrected
		central visual acuity in your better eye is 6/60 on worse or your side vision is 20 degrees or less in the
		better eye.
		Cancer (RA 11515) - Cancer refers to a genetic term for a large group of diseases that can affect
		any part of the body. Other terms used are malignant tumors and neoplasms. One defining
		feature of cancer is the rapid creation of abnormal cells that grow beyond their usual boundaries,
		and which can then invade adjoining parts of the body and spread to other organs;
1		Rare Disease (RA10747) -refers to disorders such as inherited metabolic disorders and other
1		diseases with similar rare occurrence as recognized by the DOH upon recommendation of the
1		NIH but excluding catastrophic (i.e., life threatening, seriously debilitating, or serious and chronic)
		forms of more frequently occurring diseases.
9	Cause of Disability	Check the appropriate box/es for the Cause/s of Disability sustained by the <i>Person with Disability</i> . This
	2222 2. 2.000	field can be multiple checking.
		Acquired – is a disability that has developed during the person's lifetime – that is as a result of
		an accident or illness rather than a <i>disability</i> the person was born with.
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		Chronic illness - describes a group of health conditions that last a long time. It may get slowly worse over time or may become permanent or may lead to death. It may cause permanent change to the body and will certainly affect the person's quality of life. This is also true to persons diagnose with Cancer or Rare Disease. Thus, Chronic illnesses may cause disability, hence, it is considered not a disability.  Congenital/Inborn - disease is present at birth  Injury - An injury is the physical damage that results when a human body is suddenly or briefly subjected to intolerable levels of energy. It can be a bodily lesion resulting from acute exposure to energy in amounts that exceed the threshold of physiological tolerance, or it can be an impairment of function resulting from a lack of one or more vital elements (i.e. air, water, warmth), as in drowning, strangulation or freezing. The time between exposure to the energy and the appearance of an injury is short. (INJURY SURVEILLANCE GUIDELINES, Published in conjunction with the Centers for Disease Control and Prevention, Atlanta, USA, by the World Health Organization, 2001)  Autism: refers to a range of conditions characterized by some degree of impaired social behavior, communication and language, and a narrow range of interests and activities that are both unique to the individual and carried out repetitively.  ADHD (Attention Deficit hyperactivity Disorder): is a disorder marked by an ongoing pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development.  Cerebral Palsy: is a complex motor. disorder at the level of the central. nervous system. It is caused by irreversible brain lesions occurring  Down Syndrome: is a genetic disorder in which some, or all, of a person's cells have an extra
10		chromosome.
10	Residence Address	Write the <i>Person with Disability</i> 's permanent address - House No. and Street, Barangay, Municipality/City, Province and Region  Note: House No. and Street name should be encoded in the system, but the Region, Province, Municipality/City and Barangay is already built—in to the system; just click the appropriate Region, Province, Municipality/City, and Barangay of the Person with Disability
11	Contact Details	Write the Telephone No., Mobile No., and E-mail address of the <i>Person with Disability</i> if available.
12	Educational	Check the appropriate circle for the highest education attained by the <i>Person with Disability</i> .
	Attainment	, , , , , , , , , , , , , , , , , , ,
13	Status of Employment	Check the appropriate circle for the working status of the <i>Person with Disability</i> . One item must be chosen in this field.  Employed - persons in the labor force who were reported either at work or with a job or business although not at work:  a) At Work - those who did some work, even for one hour during the reference period. b) With a Job or Business but not at Work - those who have a job or business even though not at work during the reference period because of temporary illness/injury, vacation or other leave of absence, bad weather or strike/labor dispute or other reasons.  Likewise, persons who are expected to report for work or to start operation of a farm or business enterprise within two weeks from the date of the enumerator's visit are considered employed.  Unemployed - includes all persons who are 15 years old and over as of their last birthday and are reported as: 1) without work, i.e., had no job or business during the basic survey reference period; AND, 2) currently available for work, i.e., were available and willing to take up work in paid employment or self-employment during the basic survey reference period, and/or would be available and willing to take up work in paid employment or self-employment within two weeks after the interview date; AND, 3) seeking work, i.e., had taken specific steps to look for a job or establish a business during the basic survey reference period; OR not seeking work due to the following reasons: (a) tired/believe no work available, i.e., the discouraged workers who looked for work within the last six months prior to the interview date; (b) awaiting results of previous job applications; (c) temporary illness/disability; (d) bad weather; and (e) waiting for rehire/job recall.  Self-employed - is an independent contractor or sole proprietor who reports income-earned own business. The person works for him/herself at a variety of trades, professions, and occupations rather than working for an employer.
13 a	Category of Employment	Check the appropriate circle for the Category of Employment of the <i>Person with Disability</i> .  *Permanent/Regular - the directly employed; work for an employer and are paid directly by that employer; permanent/regular employees do not have a predetermined end date of employment; permanent employees are often eligible to switch job positions within their companies



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		<b>Seasonal</b> - the term seasonal employment refers to open positions in an organization that are available for only a portion of the year; seasonal employment is a form of temporary employment, whereby the workload occurs only during certain times of the year <b>Casual</b> - employees are employees who do not have regular or systematic hours of work or an expectation of continuing work; a typical casual employee is employed on a daily basis when the need arises
		<b>Emergency</b> - means any work performed for the purpose of preventing or alleviating the physical trauma or property damage threatened or caused by an emergency; emergency work means work, which could not be covered by a weekly employee because of extenuating circumstances
13 b	Types of Employment Occupation	Check the appropriate circle for the Type of Employment of the <i>Person with Disability</i> .  Check the appropriate circle for the Occupation of the <i>Person with Disability</i> . If not stated in the choice,
		check "Others" then specify.
		Major Group 1. Managers - workers in this group plan, direct, coordinate and evaluate the overall activities of enterprises, governments and other organizations, or of organizational units within them, and formulate and review their policies, laws, rules and regulations.  Major Group 2. Professionals - workers in this group increase the existing stock of knowledge, apply scientific or artistic concepts and theories, teach about the foregoing in a systematic
		manner, or engage in any combination of these activities.
		Major Group 3. Technicians and associate professionals - workers in this group perform mostly technical and related tasks connected with research and the application of scientific or artistic concepts and operational methods, and government or business regulations.
		<b>Major Group 4. Clerical support workers</b> workers in this group record, organize, store, compute and retrieve information related, and perform a number of clerical duties in connection with money-handling operations, travel arrangements, requests for information, and appointments.
		Major Group 5. Service and sales workers - workers in this group provide personal and protective services related to travel, housekeeping, catering, personal care, or protection against fire and unlawful acts, or demonstrate and sell goods in wholesale or retail shops and similar establish ments, as well as at stalls and on markets.
		MajorGroup 6. Skilled agricult ural, forestry and fishery workers - workers in this group grow and harvest field or tree and shrub crops gather wild fruits and plants, breed, tend or hunt animals, produce a variety of animal husbandry products, cultivate, conserve and exploit forests, breed or catch fish and cultivate or gather other forms of aquatic life inorder to provide food, shelter and income for themselves and their households.
		Major Group 7. Craft and related trades workers - workers in this group apply specific knowledge and skills in the fields to construct and maintain buildings, form metal, erect metal structures, set machine tools, or make, fit, maintain and repair machinery, equipment or tools, carry out printing work, produce or process foodstuffs, textiles, or wooden, metal and other articles, including handicraft goods.
		Major Group 8. Plant and machine operators and assemblers - workers in this group operate and monitor industrial and agricultural machinery equipment on the spot or by remote control, drive and operate trains, motor vehicles and mobile machinery and equipment, or assemble products from component parts according to strict specifications and procedures.
		<b>Major Group 9. Elementary occupations</b> - occupations in this group involve the performance of simple and routine tasks which may require the use of handheld tools and considerable physical effort.
		Major Group 10. Armed forces occupations - this major group includes all jobs held by members of the armed forces. Members of the armed forces are those personnel who are currently serving in the armed forces, including auxiliary services, whether on a voluntary or compulsory basis, and who are not free to accept civilian employment and are subject to military discipline. Included are members of the army, navy, air force and other military services, as well as conscripts enrolled for
		military training or other service for a specified period.
15	Organization Information	Write the organization information of the <i>Person with Disability</i> including the name of organization affiliated, contact person, office address, and telephone number. If none, leave it blank
16	ID Reference No.	Write the SSS, GSIS, PAG-IBIG, PNS, and Philippine Health Insurance Number if available
17	Family Background	Write the name of the father, mother and or Guardian of the <i>Person with Disability</i> in the space provided.



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18	Accomplished By	Check the appropriate circle, who accomplished the form weather Applicant, Guardian and or
		Representative. Then write the name who accomplished the form in the space provided
19	Name of Certifying	Write the name of physician who issued the Medical Certificate on the Person with Disability and write
	Physician	the license no.
20	Processing Officer:	Write the name of the processing officer who check the requirements submitted by Person with Disability
21	Approving Officer:	Write the name of the approving officer who validate and approve the requirements submitted by
		Person with Disability
22	Encoder:	Write the name of the encoder who enter the information of the Person with Disability
23	Control No.:	Write the number assigned by the Issuing Office
		Control number should be assigned by each Issuing offices (MSWDO/CMSWDO/PDAO)
24	NAME OF REPORTING	For the issuing office, Automatic generation of the system based on the User account
	UNIT:(OFFICE/SECTION)	

Sources defintion of terms are the following: Republic Act 10747, MOP of ONEISS, Department Admnistrative 2013-0005 and
Amedment Department Admnistrative 2013-0005-A, Republic Act 1215, Philippine Standard Occupational Classification Of 2012.
Work Health Organization (thru online searching) DOLE 2019 guideline (thru online searching