



Department of Social Welfare and Development

SOCIAL PENSION FOR INDIGENT SENIOR CITIZENS

1x1 picture

 Province

 City / Municipality

GENERAL INTAKE SHEET

I. IDENTIFYING INFORMATION

 Name: _____ Citizenship: _____
 (Last Name, First Name, Middle Name)

 Present Address: _____
 (House No. Street Barangay City/Municipality Province)

Age: _____ Sex: _____ Civil Status: _____ Religion: _____

 Birthdate: _____ Birthplace: _____
 (Month, Date, Year)

Educational Attainment: _____

Affiliation/Group: _____ Listahanan (please specify household number) _____

_____ Pantawid Beneficiary _____ Senior Citizen Organization

_____ Indigenous People (please specify) _____

_____ Others (please specify) _____

ID Number: OSCA _____ TIN _____ GSIS _____

SSS _____ Philhealth _____ Others _____

II. FAMILY COMPOSITION

Name	Relationship	Age	Civil Status	Occupation	Income

 Living Arrangement: _____ Owned _____ Living Alone _____ Living with Relatives
 _____ Rent _____ Others, please specify _____

III. ECONOMIC STATUS

Pensioner? _____ Yes _____ No If yes, how much? _____

Source: _____ GSIS _____ SSS _____ AFPSLAI _____ Others

Permanent Source of Income? _____ Yes _____ None If yes, from what source? _____

Regular Support from Family? _____ Yes _____ No

Type of Support? _____ Cash (How much and how often) _____ In kind (specify)

IV. HEALTH CONDITION

Condition / Illness: _____

With maintenance: ___ Yes ___ No If yes, please specify: _____

V. ASSESSMENT

I hereby certify that the above-mentioned information are true and correct to the best of my knowledge.

Interviewed by:

DSWD FO Social Pension Staff
(Signature over Printed Name)

Date of Interview: _____

(Signature over Printed Name of Senior Citizen)