

This document may be reproduced  
and is **not FOR SALE**  
Revised 2022



FOI Tracking Number

[Redacted]



**NATIONAL LABOR RELATIONS COMMISSION**  
**FREEDOM OF INFORMATION REQUEST FORM**  
(Pursuant to Executive Order No. 2, s. 2016 as of November 2016)

Please read the following information carefully before proceeding with your application. Use blue or black ink. Write neatly and in BLOCK letters. Improper or incorrectly-filled out forms will not be acted upon.

**A. Requesting Party**

1. Full Name: \_\_\_\_\_

2. Address: \_\_\_\_\_  
(Apt/House Number, Street, City/Municipality, Province)

3. Landline/Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

4. Preferred Mode of Communication:  Landline  Mobile Number  Email  
(If your request is successful, we will be sending the documents to you in this manner)

5. Preferred Mode of Reply:  Email  Fax  Pick-Up at Agency

6. Type of ID Given:  Passport  Driver's License  SSS/GSIS ID  Postal ID  Voter's ID  
 School ID  Company ID  TIN/BIR ID  Other/s: \_\_\_\_\_  
(ID shall contain the picture and signature of the requesting party)

**B. Requested Information**

7. Title of Document/Record Requested: \_\_\_\_\_

8. Document Type: \_\_\_\_\_ 9. Covered Period (mm/dd/yy): \_\_\_\_\_

10. Purpose of Request: \_\_\_\_\_

**C. Declaration**

**Privacy Notice:** Once deemed valid, your information from your application will be used by the agency you have applied to, to deal with your application as set out in the Freedom of Information EO No. 2. If the Department of Agency gives you access to a document, and if the document contains no personal information about you, the document will be published online in the Department or Agency's disclosure log, along with your name and the date you applied, and, if another person, company or body will use or benefit from the documents sought, the name of that person, entity or body.

I declare that:

- The Information provided in the form is complete and correct.
- I have read the Privacy Notice.
- I have presented at least one (1) valid ID to establish proof of my identity

I understand that it is an offense to give misleading information about my identity, and that doing so may result in a decision to process my application

\_\_\_\_\_  
(Signature of Requesting Party/ Date Accomplished)

**D. FOI Receiving Officer/Decision Maker (INTERNAL USE ONLY)**

FOI Receiving Officer: \_\_\_\_\_  
(Name, Position/Designation)

Date/Time of Receipt (mm/dd/yy): \_\_\_\_\_

Type of ID Given:  Passport  Driver's License  SSS/GSIS ID  Postal ID  Voter's ID  
 School ID  Company ID  TIN/BIR ID  Other/s: \_\_\_\_\_  
(ID shall contain the picture and signature of the requesting party)

The request is recommended to be:  Accepted/Approved  Denied

Reason:  Document Available on File  Document Available Online  
 Information Under Exception/s  Document not Available  
 Request Not Valid

Request is referred to (when filed is available in other office) \_\_\_\_\_

\_\_\_\_\_  
(Signature/FOI Receiving Officer)

FOI Evaluation Officer: \_\_\_\_\_  
(Name, Position/Designation)

Decision on FOI Request:  Accepted/Approved  Denied

If there is request for Extension, Number of Days: \_\_\_\_\_ Reason of Extension: \_\_\_\_\_

Date Request Completely Acted Upon: (mm/dd/yy): \_\_\_\_\_

**FOI Decision Maker :**

\_\_\_\_\_  
(Name, Position/Designation)

Decision on FOI Request:  Accepted/Approved  Denied

\_\_\_\_\_  
(Signature/Champion)

**E. Completion of Request**

Date Documents/Response Received by the Applicant: (mm/dd/yy): \_\_\_\_\_

Date Encoded in the FOI Registry: (mm/dd/yy): \_\_\_\_\_

Status of Request:  Successful  Denied (Invalid Request)  
 Proactively Disclosed  Denied (Information under exceptions)  
 Partially Successful  Closed (Details were not provided by applicant)  
 Info Referred to Other Office