



2016 SEARCH FOR OUTSTANDING PUBLIC OFFICIALS AND EMPLOYEES NOMINATION FORM

GROUP CATEGORY

Presidential *Lingkod Bayan* Civil Service Commission *Pagasa*

The Nominee

Name of Group:	Name of Team Leader:
	Position:
Telephone/Cellphone Nos:	Email address:
Agency/Region:	
Agency Address:	
Telephone/Cellphone Nos:	
Team Members (Name and Position indicated in the Service Record)	
1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

OFFICE / REGIONAL HEAD

Name:
Position:
Telephone / Cellphone Nos.:
Email address:

DEPARTMENT SECRETARY / AGENCY HEAD

Name:
Position:
Agency Address:
Telephone/Cellphone Nos.:
Email address:

NOMINATOR

Name:	Position:
Agency:	Telephone/Cellphone Nos.:
Agency Address:	Email add:

Additional Information about the Nominee:

Were you a previous HAP Nominee? <input type="checkbox"/> Yes <input type="checkbox"/> No	What year: _____	What Award Category: _____
Were you a previous HAP Semi-finalist? <input type="checkbox"/> Yes <input type="checkbox"/> No	What year: _____	What Award Category: _____
Were you a previous HAP Awardee? <input type="checkbox"/> Yes <input type="checkbox"/> No	What year: _____	What Award Category: _____

Nomination Write-up

(Maximum of 10 pages, A4 size bond paper, Arial #12 font, including executive summary)

Name of Group: _____ Agency: _____
Position: _____ Division/Unit: _____
Length of Service in the Position: _____ In Government: _____

I. Executive Summary

Click here to enter text.

II. Significant Accomplishment/s within the Last Three Years

(Description of the Project/Work Accomplished, Strategies/Activities Done and Problems Encountered) The nomination of heads of offices and agencies including that of the Local Chief Executives should reflect their individual accomplishments)

Click here to enter text.

III. Impact of Accomplishments

(Indicate problems addressed, savings generated, people/office benefited and transactions facilitated. Indicate whether or not the accomplishments are part of the nominee's regular functions/mandated or the product of his/her/their own initiative. If part of nominee's regular duties or mandated, justify why the accomplishments are considered exemplary or extraordinary) For **Presidential Lingkod Bayan Category**: What was the impact of the extraordinary contribution to national public interest? For **CSC Pagasa Category**: What was the impact of the Outstanding contribution to more than one department of the government?

Click here to enter text.

IV. Other Information

(List or mention Major Awards/Citations Received/Membership in the Organization. No need to attached photocopies of certificates.)

Click here to enter text.

CERTIFICATION

We attest to all facts contained herein and authorize the use of these information for publication. We understand that the Committee on Awards will validate the accuracy of the information contained in this form and grant our consent to the conduct of a background investigation. Any misrepresentation made by the signatories shall be a ground for disciplinary action pursuant to applicable Civil Service laws and rules.

Printed Name and Signature

Nominee

Nominator

PRAISE Committee/Highest HRMO

Regional Office Head

INFORMATION ON TEAM/GROUP MEMBERS

Name of Team Members	Position/Status of Appt./Agency	Contribution/s of each member (Including those of disqualified members)	Reason for disqualification of the Team Members, if any.
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.

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CHAIR, PRAISE Committee
Signature over printed name