APPLICATION FOR OWWA MEMBERSHIP

> Printed Name and Signature or eSignature of EMPLOYER

> > OR

Submit image of proof of remittance to the Philippines (any amount, any date)

NOTE: Signing this form does not bestow any obligation on the part of the employer insofar as the application is concerned.

x -----x

APPLICATION FOR DOLE-AKAP

I wish to avail of the Department of Labor and Employment's Financial Assistance for Displaced Workers or DOLE-AKAP and declare that I am currently not working and receiving salary due to the effects of the COVID-19 pandemic, and I have not received nor am I qualified to receive any form of financial assistance from my employer or from the government of my host country.

Date and Place: _____

(Halimbawa: 17 April 2020, Moscow, Russia)

Printed Name and Signature or eSignature of EMPLOYEE only

NO NEED FOR EMPLOYER'S SIGNATURE