DOCUMENTARY REQUIREMENTS FOR MEDICAL AND SURVIVORSHIP ASSISTANCE

F	FOR MEDICAL ASSISTANCE		
	Endorsement Letter by Local Chief Executive		
1.			
	Note: for the header of the letter follow the format below:		
	AZUCENA M. DAYANGHIRANG, MD, MCH, CESE		
	Executive Director		
	National Nutrition Council		
	Nutrition Building, 2332 Chino Roces Avenue Extension Taguig City		
	Through: GLADYS MAE S. FERNANDEZ, RND, RN, MDM Nutrition Program Coordinator, NNC X		
2.	Certified copy of BNS Masterlist		
3.	Photocopy of one (1) valid ID of BNS		
4.	Letter request of BNS applicant		
	Note: for the header of the letter follow the format below:		
	AZUCENA M. DAYANGHIRANG, MD, MCH, CESE		
	Executive Director		
	National Nutrition Council		
	Nutrition Building, 2332 Chino Roces Avenue Extension		
	Taguig City		
	Through: GLADYS MAE S. FERNANDEZ, RND, RN, MDM Nutrition Program Coordinator, NNC X		
5.	Original medical certificate		
	OR SURVIVORSHIP ASSISTANCE		
	1. Endorsement Letter by Local Chief Executive		
	Note: for the header of the letter follow the format below:		
	AZUCENA M. DAYANGHIRANG, MD, MCH, CESE		
	Executive Director		
	National Nutrition Council		
	Nutrition Building, 2332 Chino Roces Avenue Extension		
	Taguig City		
	Through: GLADYS MAE S. FERNANDEZ, RND, RN, MDM		
	Nutrition Program Coordinator, NNC X		
	2. Letter request of beneficiary of deceased BNS		
	Note: for the header of the letter follow the format below:		
	AZUCENA M. DAYANGHIRANG, MD, MCH, CESE Executive Director		

National Nutrition Council Nutrition Building, 2332 Chino Roces Avenue Extension Taguig City

Through: **GLADYS MAE S. FERNANDEZ, RND, RN, MDM** Nutrition Program Coordinator, NNC X

3.	Certified copy of BNS Masterlist
4.	Photocopy of one (1) valid ID of deceased BNS
5.	Photocopy of one (1) valid ID of BNS' beneficiary
6.	Certified true copy of death certificate

Medical Assistance – Php. 5, 000.00 Survivorship Assistance – Php. 20, 000.00

For BNS Travelling Allowance

BNS monthly allowance is worth Php. 100.00

DC	DOCUMENTARY REQUIREMENTS		
1.	Letter of request signed by Local Chief Executive		
	Note: for the header of the letter follow the format below:		
	AZUCENA M. DAYANGHIRANG, MD, MCH, CESE		
	Executive Director		
	National Nutrition Council		
	Nutrition Building, 2332 Chino Roces Avenue Extension		
	Taguig City		
	Through: GLADYS MAE S. FERNANDEZ, RND, RN, MDM		
	Nutrition Program Coordinator, NNC X		
2.	Certified copy of BNS Masterlist		
3.	Liquidation Report (renewal)		
4.	Training report (expansion and new request) – with attendance sheet, POA and Budget		
5.	Financial Plan		
6.	Memorandum of Agreement (new request) – with SP/SB resolution		