BUREAU OF MUSLIM CULTURAL AFFAIRS

#79 Jocfer Annex Bldg., Commonwealth Avenue, Quezon City

BMCA.CIDD.F.16 (APPLICATION FORM & CHECKLIST OF REQUEST OF REQUEST OF REQUEST OF REQUEST OF REQUEST OF REQUEST OF REQUEST.	JIREMENTS FOR REGISTRATION OF MOSQUE/CULTURAL CENTER)
I. Identification 1. Name of Mosque/Cultural Center:	CHECKLISTS OF REQUIREMENTS 1. [] Request Letter from the Mosque Administrator/Imam;
2. Address:	2. [] Photocopy of SEC Registration, Article of Incorporation & By-Laws;3. [] List of Officers & Members or Jama'ah;
3. Administrator/Imam:	4. [] Barangay Certification as to the existence of the Mosque/Cultural Center;
4. Contact NoEmail Add.:	5. [] Mayor's permit, if any; 6. [] Pictures of the Mosque/Cultural Center, Office Building, structures and other related photos;
5. S.E.C. Reg. No., if any: Date of Issuance:	7. [] Report of ocular inspection by NCMF Field Office, if necessary for validation; 8. [] Endorsement from NCMF Regional or
II. Data on Mosque/Cultural Center 1. Type of Mosque/Cultural Center: (Please Check) Government NGO/PO	Provincial Office where the Mosque/ Cultural Center is located; and 9. [] Application Form duly accomplished by the Mosque Administrator/Imam or
(Others, Pls. Specify) 2. Focus of Mosque/Cultural Center: (Please Check) Youth Inclusive of ages (Others, Pls. Specify)	Authorized representative.
III. Primary objective and/or activities of the Mosque/Cu	ultural Center
I HEREBY CERTIFY that the above-ment knowledge.	ntioned statements are true and correct to the best of my
(Circulate Oran Britan I News)	(Signature Over Printed Name) Applicant
(Signature Over Printed Name) Evaluator	
Recommendation: Approve Disapprove Remarks:	For Compliance
Date: Revi	iewed by:

(Signature Over Printed Name) Chief, CID Division