MEMORANDUM CIRCULAR NO. No. 2011-26
Series of 2011

SUBJECT: GUIDELINES ON THE SUBMISSION OF COOPERATIVE’S LIST OF OFFICERS AND TRAINING UNDERTAKEN/COMPLETED

Pursuant to Section 2 (5) of Rule 8 of the Implementing Rules and Regulations (IRR) of RA 9520, the Authority hereby issued this Circular providing the guidelines on the submission of the cooperative of the list of officers and training undertaken/completed for the reporting year.

This report is in consonance with Section 5, Rule 7 of the IRR which provides for the training requirements for the officers of the cooperative.

Section 1. Title

This Memorandum Circular shall be known as the “Guidelines in the Submission of Cooperative List of Officers and Training Undertaken/Completed”.

Section 2. Scope

These guidelines shall apply to all types and categories of cooperatives nationwide.

Section 3. Submission of the required report

The report shall reflect the specific names and positions of all the incumbent officers of the cooperative and the trainings these officers have undertaken/completed for the year being reported in compliance to training requirements for cooperative officers.

All the provisions of Rule 8 of the IRR of RA 9520 shall apply relative to the submission of the Report on the Cooperative’s List of Officers and Training undertaken/completed;

Section 4. Standard Reporting Form

The Standard reporting form called Cooperative Officers Training Form shall be used by the cooperative in the submission of the required report.
Section 5. Effectivity

This Memorandum Circular shall take effect upon approval of the CDA Board of Administrators and fifteen (15) days after filing with the Office of the National Administrative Registry (ONAR).

Approved by the CDA Board of Administrators pursuant to Resolution No. 414, s-2011 dated December 14, 2011.

For the Board of Administrators

By:

EMMANUEL M. SANTIAGUE, Ph.D.
Chairman
REPORT ON THE LIST OF OFFICERS AND TRAININGS UNDERTAKEN/COMPLETED
Fiscal Year

<table>
<thead>
<tr>
<th>NAME/S OF OFFICERS</th>
<th>POSITION IN THE COOPERATIVE</th>
<th>TITLE OF TRAINING/S COMPLETED</th>
<th>INCLUSIVE DATE and YEAR OF TRAINING</th>
<th>VENUE OF THE TRAINING</th>
<th>NAME OF TRAINING PROVIDER</th>
<th>ACCREDITATION NUMBER</th>
<th>ADDRESS OF THE TRAINING PROVIDER</th>
<th>REMARKS</th>
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Prepared by: Cooperative Secretary

Certified true and correct: General Manager of Cooperative