

CDA GAWAD PARANGAL
MOST Outstanding Cooperative Leader

NOMINATION FORM

I. PROFILE

A. PERSONAL INFORMATION:

Name of Cooperative Leader: _____

Address: _____

Age: _____ Sex: _____ Birthdate : _____

Birthplace: _____ Civil Status: _____ Religion: _____

Tel. Number(s)/Contact Number(s)

Phone : _____ Fax No. : _____

E-mail Address (es) : _____ Website address (if any) _____

Cooperative affiliated with: _____

Length of Membership: _____ Length of Officership : _____

Educational Attainment:

Graduate Studies: _____ Degree: _____

College: _____ Degree: _____

B. COOPERATIVE EXPERIENCE

| Name of Cooperatives | Years as Member | Years as Officer | Position/Designation as Officer |
|----------------------|-----------------|------------------|---------------------------------|
| • _____ | | | |
| • _____ | | | |
| • _____ | | | |

i. Contributions in Cooperative Development

- _____
- _____
- _____

ii. Books/ Publications / Materials in Cooperative Development (If any)

- _____
- _____
- _____

iii. Activities, Projects, or initiatives that bring cooperatives into excellence

- _____
- _____
- _____

C. MEMBERSHIP/AFFILIATION IN OTHER ORGANIZATIONS

- _____
- _____
- _____

D. EXEMPLARY PERFORMANCE AS COOPERATIVE LEADER

- _____
- _____
- _____

NOMINATED BY: _____
(Name of Organization/Institution)

Address: _____

Telephone: _____

E-mail(s): _____

Website: _____

Name and Signature of Authorized Representative: _____