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(Name of Organization/Association)

**RESOLUTION NO. \_\_\_\_\_, S-201\_\_**

A RESOLUTION AUTHORIZING THE FILING OF APPLICATION OF OUR ORGANIZATION FOR ACCREDITATION AS PEOPLE’S ORGANIZATION (**POs**), NON-GOVERNMENTAL ORGANIZATION (**NGOs**), OR PRIVATE SECTORS (**PSs**) WITH THE QUEZON CITY COUNCIL FOR POSSIBLE MEMBERSHIP IN THE QUEZON CITY DEVELOPMENT COUNCIL (**CDC**) AND OTHER LOCAL SPECIAL BODIES (**LSBs**) AND DESIGNATING ITS AUTHORIZED PRINCIPAL AND ALTERNATE REPRESENTATIVES THERETO.

**WHEREAS,** \_\_\_\_\_,  
(Name of Organization)

is an organization duly organized and existing in accordance with laws, rules and regulations with postal address at \_\_\_\_\_ Barangay \_\_\_\_\_ District \_\_\_\_\_ Quezon City;

**WHEREAS,** the organization is willing to be involved in the formation and implementation of the Quezon City’s plans, programs, projects and activities under its **PARTNERSHIP PROGRAM**;

**WHEREAS,** towards the attainment of its objectives, the organization has decided to apply for accreditation with the Quezon City Council for possible membership in the City Development Council and other Local Special Bodies.

**NOW, THEREFORE, BE IT RESOLVED BY THE**

\_\_\_\_\_,  
(Name of Organization)

during its last regular meeting, to authorize as it hereby authorizes the filing of the application of the organization for accreditation with the Quezon City Council for possible membership in the City’s Local Special Bodies, preferably in the \_\_\_\_\_.

(Please specify LSB/Council);

**RESOLVED FURTHER,** to designate as it hereby designates the following officers of our organization who are bonafide residents of Quezon City to be its duly authorized Principal and Alternate representatives to attend in the General Assembly Meeting/Selection of POs/NGOs/PSs Membership/Representations in the CDC of other LSBs/Councils of Quezon City and in such related activities:

Name of Principal Representative	Position	Address	Contact No.
_____	_____	_____	_____
Name of Alternate Representative			
_____	_____	_____	_____

**RESOLVED FINALLY,** that this Resolution shall form as an integral part of the organization’s application for accreditation with the Quezon City Council.

**ADOPTED** \_\_\_\_\_, 201\_\_

\_\_\_\_\_  
Board Chairperson/President  
(Signature over Printed Name)

**Board of Directors: (Please sign opposite printed name)**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**CERTIFICATION**

This is to certify that the foregoing resolution was approved on \_\_\_\_\_, 201\_\_ by the majority of the Board of Directors and Members of the Organization present in a meeting called for the purpose, there having a quorum.

Done on \_\_\_\_\_, 20\_\_\_\_, Quezon City

\_\_\_\_\_  
(Secretary)  
(Signature over Printed Name)