

UNIVERSITY OF SANTO TOMAS  
UST-SIMBAHAYAN COMMUNITY DEVELOPMENT OFFICE

**CERTIFICATION OF THE PROJECT PROPOSAL REQUIREMENTS**

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**Project Proponent – Faculty/College**

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**Project Title**

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**Target Partner Community/Institution or Project Beneficiaries**

1. ACCOMPLISHED THE TERMINAL AND EXPENSE REPORT OF PREVIOUS PROJECTS

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*Signature of the CD Coordinator (For Faculty/College-based Student Organizations/Councils)/  
Program Development Officer (For University-wide Student Organizations/Councils)*

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*Date*

2. ATTENDANCE TO CD ORIENTATION

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*Signature of the CD Coordinator (For Faculty/College-based Student Organizations/Councils)/  
Program Development Officer (For University-wide Student Organizations/Councils)*

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*Date*

3. PRESENCE OF PROFILE OF THE CHOSEN PARTNER COMMUNITY/INSTITUTION

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*Signature of the CD Coordinator (For Faculty/College-based Student Organizations/Councils)/  
Program Development Officer (For University-wide Student Organizations/Councils)*

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*Date*

4. PRESENCE OF MEMORANDUM OF UNDERSTANDING OR MEMORANDUM OF AGREEMENT WITH THE CHOSEN PARTNER COMMUNITY/INSTITUTION

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*Signature of the CD Coordinator (For Faculty/College-based Student Organizations/Councils)/  
Program Development Officer (For University-wide Student Organizations/Councils)*

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*Date*

5. BUDGET CODE FOR THE PROJECT \_\_\_\_\_