



NCFRS ENROLLMENT FORM

NATIONAL COCONUT FARMERS' REGISTRY SYSTEM (NCFRS)

REFERENCE / CONTROL NO.:

New Existing

Date:

m m d d y y y y

Write legibly and neatly (not in cursive handwriting)

Items with * are mandatory fields and must not be left blank

PART I. PERSONAL INFORMATION

1 NAME OF FARMER* Last Name (LN) First Name (FN) Middle Name (MN) Suffix (EN)

2 ADDRESS* HOUSE / LOT / BLDG.NO. STREET / SITIO / SUBD. BARANGAY
MUNICIPALITY / CITY PROVINCE REGION

3 DATE OF BIRTH* **4** SEX* M F

5 PLACE OF BIRTH

6 CIVIL STATUS* Single Married Widowed Separated

7 HIGHEST EDUCATIONAL ATTAINMENT* None Elem. Level HS Level College Level Vocational Elem. Grad HS Grad. College Grad. Postgraduate

8 With Gov't. ID?* Y N ID Type ID No.

9 CONTACT NUMBERS* 1. 2.

10 RELIGION*

11 Mother's Maiden Name Lastname (LN) Firstname (FN) Middle Name (MN) Extension Name or Suffix (EN)

12 Name/s of Legal Spouse/s, if Married: Lastname (LN) Firstname (FN) Middle Initial (MI) Date of Birth of Spouse Works in Coco Farm: Y N Number of Children

13 CHILDREN: Use separate sheet if necessary.

LN	FN	MI	SEX (M/F)	DATE OF BIRTH	Works in Coco Farm:	Civil Status:
1. <input type="text"/>	<input type="text"/>	<input type="text"/>	M <input type="checkbox"/> F <input type="checkbox"/>	<input type="text"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	<input type="text"/>	M <input type="checkbox"/> F <input type="checkbox"/>	<input type="text"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>	<input type="text"/>	M <input type="checkbox"/> F <input type="checkbox"/>	<input type="text"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	<input type="text"/>
4. <input type="text"/>	<input type="text"/>	<input type="text"/>	M <input type="checkbox"/> F <input type="checkbox"/>	<input type="text"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	<input type="text"/>
5. <input type="text"/>	<input type="text"/>	<input type="text"/>	M <input type="checkbox"/> F <input type="checkbox"/>	<input type="text"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	<input type="text"/>
6. <input type="text"/>	<input type="text"/>	<input type="text"/>	M <input type="checkbox"/> F <input type="checkbox"/>	<input type="text"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	<input type="text"/>

14 Person to Notify in Case of Emergency: *LN FN MI Contact No.:

15 HOUSEHOLD HEAD?* Yes No If No, Indicate Name of Household Head. Relationship: No. of Household Members?

16 Current Occupation/Profession aside from Coco Farming* Year Started in this Occu./Prof. Monthly Income

17 Beneficiary of Agrarian Reform* Yes No Since When (Indicate Year):

18 PERSON WITH DISABILITY (PWD): Yes No If yes, specify:

19 Beneficiary of any Gov't. Program?* Yes No Program 4Ps SAP Insurance Others Year/s Participated

20 Member of an Indigenous Group? Yes No If yes, specify:

21 Beneficiary of any PCA Programs/Projects | Year Participated* Yes No

Intervention/s	Seedlings	Fertilizers	Incentives	Intercrops	Livestock	Equipment	Training	Others
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Year/s Participated	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

22 Membership in Coco Farmers Assoc/Coop?* Yes No Cooperative Farmers' Assoc. Others **23** Year started in Coco Farming

24 NUMBER OF COCONUT FARM PARCEL OWNED, TENANTED, OR WORKED FOR?* (CHECK BOX/ES AND INDICATE NUMBER/S)

Owner	Owner-Tiller	Grower	Tenant	Tenant-Worker	Worker-Laborer	Others	TOTAL PARCEL
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>



NATIONAL COCONUT FARMERS' REGISTRY SYSTEM (NCFRS) ENROLLMENT CLIENT'S COPY		REFERENCE / CONTROL NO.: <input type="text"/> Date: <input type="text"/>	
LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

PART II. FARM PROFILE

25 Parcel No. 26 Land-Holding Status* Owner Owner-Tiller Grower Tenant Tenant-Worker Worker-Laborer Others
 27 Farm Location*: Prov.: _____ Mun/City: _____ Brgy: _____

CHOICES

FOR OWNER or OWNER-TILLER | GROWER | TENANT or TENANT-WORKER^{1/} | OTHERS

^{1/} For Tenant or Tenant-Worker with ABSENTEE OWNER only

28 Land Ownership Area (in Hectares)*

Absolute	Coconut	Intercrop	Other Crop	Idle
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

 30 Organic Certified* Y N

29 Area Classification* Inland-Upland Inland-Flat Coastal-Upland Coastal-Flat 31 GAP Certified* Y N

NOTE: PUT ONLY THE EQUIVALENT NUMBER/S ON QUESTIONS WITH CHOICES. REFER TO VALUES ON RIGHT.

32 COCONUT TREES*

Variety A	Year Planted	Planting Pattern B	Planting Distance C	No. of Trees	Ave.Nut/Tree/Year

33 FARM INCOMES / EXPENSES*

Type D	Quantity of Produce per Hectare/Year	Unit (check one or specify)					Unit Price (P)	Expenses (Specify Per Type)	
		Kg	Pc	Liter	Head	Type/s E		Amount (P)	

34 Types of Processing Facilities: Dryer, Specify _____ Charcoal Kiln Decort. Machine Others, _____

35 Distance of Farm to Market: _____ kms. 36 Coco Harvesting Cycle: Less than 45 days 45 days 60 days 90 days
 Others, specify: _____

37 Percent Utilization of Coconut Parts:

	1	2	3	4	5	6
F Husks	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
G Shell	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
H Water	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Others, specify: _____

38 Whom and Where Products are Sold?

	Nuts	Buko	Shell	Copra	Husks	Intercrop
I	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
J	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

39 OWNERSHIP DOCUMENT*:

<input type="checkbox"/> Certificate of Land Transfer	<input type="checkbox"/> Co-ownership CLOA	<input type="checkbox"/> Certificate of Title or Regular Title	<input type="checkbox"/> Others, Specify _____
<input type="checkbox"/> Emancipation Patent	<input type="checkbox"/> Agricultural sales patent	<input type="checkbox"/> Certificate of Ancestral Domain Title	
<input type="checkbox"/> Individual Certificate of Land Ownership Award (CLOA)	<input type="checkbox"/> Homestead patent	<input type="checkbox"/> Certificate of Ancestral Land Title	
<input type="checkbox"/> Collective CLOA	<input type="checkbox"/> Free Patent	<input type="checkbox"/> Tax Declaration	
	<input type="checkbox"/> Extrajudicial Partition	<input type="checkbox"/> Deed of Sale	<input type="checkbox"/> DAR ID

For TENANT or TENANT-WORKER | OTHERS only: Write the Name of Farm Owner.
For FARM WORKER-LABORER only: Write the Name of Owner or Tenant you are working for.

40 NAME OF OWNER or TENANT*: Lastname (LN) Firstname (FN) Middle Name (MN) Extension Name or Suffix (EN)
 LN FN MN EN

41 Farm Location*: Prov.: _____ Mun/City: _____ Brgy: _____

FOR TENANT-WORKER | FARM WORKER-LABORER | OTHERS ONLY

42 Kind of Work: **K**

1	2	3	4	5	6	7
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

 Others, specify: _____

43 Monthly Income*:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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43 Number of Days Working on Coconut Farm: In a Week _____ In a Month _____ In a Year _____

I hereby declare that all information indicated above are true and correct, and that they may be used by Philippine Coconut Authority for the purposes of registration to the NCFRS and other legitimate interests of the Authority pursuant to its mandates. The personal information I provide in this form is given on my own volition. I understand and agree to the intended purpose of the information being given and authorize PCA or its official agents to handle, process and store said information for the intended purpose subject to compliance with RA 10173 or the Data Privacy Act.

Date	Printed Name of Applicant	Signature of Applicant	Thumbmark

45 VERIFIED TRUE AND CORRECT BY:

SIGNATURE ABOVE PRINTED NAME / DATE	SIGNATURE ABOVE PRINTED NAME / DATE	SIGNATURE ABOVE PRINTED NAME / DATE	SIGNATURE ABOVE PRINTED NAME / DATE
BARANGAY CHAIRMAN	CITY/MUNICIPAL AGRIC. OFFICE	PCA AGRICULTURIST/DIV. CHIEF	CAFC/MAFC CHAIRMAN

The collection of personal information is for documentation, planning, reporting and processing purposes in availing agricultural related interventions. Processed data shall only be shared to partner agencies for planning, reporting and other use in accordance to the mandate of the agency. This is in compliance with the Data Sharing Policy of PCA. You have the right to ask for a copy of your personal data that we hold about you as well as to ask for it to be corrected if you think it is wrong. To do so, please contact PCA Hotline: _____

46 Interviewed by: 47 Encoded by:
 SIGNATURE ABOVE PRINTED NAME / DATE

VERIFIED TRUE AND CORRECT BY:

SIGNATURE ABOVE PRINTED NAME / DATE	SIGNATURE ABOVE PRINTED NAME / DATE	SIGNATURE ABOVE PRINTED NAME / DATE	SIGNATURE ABOVE PRINTED NAME / DATE
BARANGAY CHAIRMAN	CITY/MUNICIPAL AGRIC. OFFICE	PCA AGRICULTURIST/DIV. CHIEF	CAFC/MAFC CHAIRMAN

For more information, please contact:

- COCONUT TREES**
Variety **A**
 1-Laguna Tall, 2-Tagnanan Tall, 3-Tacunan Dwarf, 4-Catigan Dwarf, 5-Makapuno, 6-PCA 15-1, 7-PCA 15-2, 8-Others,specify
Planting Pattern **B**
 1-Triangular, 2-Square, 3-Irregular, 4-Triple Planting, 5-Others,specify
Planting Distance **C**
 1-8x8, 2-9x9, 3-10x10, 4-Irregular, 5-Others,specify
FARM INCOME TYPES: **D**
Coconut Products
 1-Copra, 2-Whole Nut, 3-Buko, 4-Others,specify
Food By-Products
 5-VCO, 6-Sugar, 7-Vinegar, 8-Tuba, 9-Others,specify
Non-Food By-Products
 10-Husk, 11-Shell, 12-Others,specify
Intercrops
 13-Coffee, 14-Cacao, 15-Corn, 16-Vegetables, 17-Others,specify
Other Crops
 18-Rice, 19-Others,specify
Livestock/Poultry
 20-Carabao, 21-Cattle, 22-Pig, 23-Goat, 24-Chicken, 25-Others,specify

- EXPENSE TYPE: **E****
 1-Farm Labor, 2-Marketing, 3-Farm Inputs, 4-Others, specify

- HUSKS UTILIZATION: **F****
 1-Fuel for Copra Making, 2-Household Fuel, 3-Handicraft, 4-Ornamental, 5-Farm Mulching, 6-Wasted, 7-Others,specify

- SHELL UTILIZATION: **G****
 1-Fuel for Copra Making, 2-Household Fuel, 3-Handicraft, 4-Directly Sold, 5-Charcoal Making, 6-Wasted, 7-Others,specify

- WATER UTILIZATION: **H****
 1-Vinegar Making, 2-Wasted, 3-Others,specify

- WHOM SOLD (A): **I****
 1-Picked-up by Buyer, 2-Delivered to Buyer, 3-Direct to Processor, 4-Direct to Exporter; 5-Others, specify

- WHERE SOLD (B): **J****
 1-Trader within the Brgy, 2-Trader within the Mun, 3-Trader in Neighboring City, 4-Others, specify

- KIND OF WORK: **K****
 1-Land Preparation, 2-Planting, 3-Cultivation, 4-Harvesting, 5-Farm Maintenance, 6-Copra Making, 7-Dehusking, 6-Drying, 7-Charcoal Making, 8-Others,specify

