

LABOR AND VISA SERVICES DIVISION

Type of Application	<input type="checkbox"/> new <input type="checkbox"/> renewal <input type="checkbox"/> cancellation
Company Name	
Name of Applicant	
Dependent	
Position	
Visa Validity	
O.R Number/Date	

Date Received	Received By (name & signature)	Actions to be Taken	Date Released	Remarks (if any)
		Receive application		Paid <input type="checkbox"/> Date: _____ OR No. _____ Unpaid <input type="checkbox"/>
		Evaluate application		
		Prepare CWV documents/CWV Cancellation		
		<ul style="list-style-type: none"> Review and initial of Section Head/Department Head/Group Head 		
		<ul style="list-style-type: none"> Approval/signature of ACEO/Group Head 		
		Send application to BI Cagayan and wait for the BI receipt		BI Receipt No. _____ Date: _____
		<ul style="list-style-type: none"> Prepare CWV Sticker 		
		<ul style="list-style-type: none"> Approval/signature of ACEO 		
		Issue CWV/Cancel CWV		
		<ul style="list-style-type: none"> Receive Passport and CWV/Cancelled CWV 		