



Philippine
Overseas
Employment
Administration

Republic of the Philippines
Department of Labor and Employment
BFO Building, Ortigas Avenue cor. EDSA, Mandaluyong City 1501
Website: www.poea.gov.ph E-mail: info@poea.gov.ph
Hotlines: 722-1144, 722-1155



ADVISORY NO. 28
Series of 2021

In relation to the Social Security Act of 2018 of the Social Security System (SSS), as well as, POEA Memorandum Circular No. 24, Series of 2020 providing for the guidelines to be followed by the respective POEA Offices, as mentioned therein, the **Welfare Services Branch (WSB)** would like to reiterate the following documentary requirements to be submitted prior to the processing and issuance of the Certification:

- 1.) Copy of one (1) Valid ID;
- 2.) Copy of either of the following, as the case may be:
 - a. Copy of **Notice of Termination issued by the employer** indicating any of the causes of involuntary unemployment, as mentioned in the prevailing rules and regulations on the foregoing; or
 - b. Duly **Notarized Affidavit of Termination of Employment (POEA format¹)** in the absence of the Notice of Termination; and proof of the OFW's arrival in the Philippines, such as stamp of arrival by the Bureau of Immigration in the OFW's passport, or similar documents.

I. ENDORSED APPLICATION / E-MAIL APPLICATION

For those Offices outside WSB which receive requests for Certification from Overseas Filipino Workers (OFWs) are requested to secure the following personal details of the applicant to be included in the indorsement of the documents:

1. FULL NAME
2. ADDRESS
3. MOBILE NUMBER
4. E-MAIL ADDRESS

Application/s forwarded **via e-mail** to the WSB will be processed only after the complete submission of the required documents. Incomplete attachment, as well as, incorrect submission of forms will render such application as PENDING until full compliance thereof. An e-mail of acknowledgment of complete documents and/or notice of compliance documents will be sent immediately after preliminary evaluation of the attachments.

¹ POEA Memorandum Circular No. 24, S. 2020, Annexed as 1.a and 2.1 (Landbased and Seabased)

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BY CRD ON FEB 23 2021

Upon full compliance, processing and issuance shall be within three (3) to five (5) working days.

II. WALK-IN APPLICATION

For walk-in applicants in the POEA – Central Office (WSB), applicants shall be reminded through notices² posted in the main lobby, as well as, at the entrance of 2/F WSB of the requirements prior to receiving and/or processing their requests. Only clear photocopies of the documents will be accepted by this Office for evaluation.

NOTE : All originally signed Certifications shall be kept and organized correspondingly in WSB if, in case, the applicant opts to get his/her copy of the original certification personally.

For your information and/or reference.



BERNARD P. OLALIA
Administrator

__ February 2021

² Notice for Walk-In Applicants, dated 14 January 2021

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14 January 2021

NOTICE FOR WALK – IN APPLICANTS

**RE : ISSUANCE OF POEA CERTIFICATION
(SSS UNEMPLOYMENT BENEFIT OR
INVOLUNTARY SEPARATION BENEFIT)**

To all **Overseas Filipino Workers (OFW)**, whether Landbased or Seabased, kindly prepare and provide at least one (1) xerox copy of each of the following documents:

- 1.) One (1) Valid ID;
- 2.) Either of the following, as the case may be:
 - a. Copy of **Notice of Termination issued by the employer** indicating any of the causes of involuntary unemployment, as mentioned in the prevailing rules and regulations on the foregoing; or
 - b. Duly **Notarized Affidavit of Termination of Employment** in the absence of the Notice of Termination;
- 3.) Proof of OFW's arrival to the Philippines, such as stamp of arrival by the Bureau of Immigration in the OFW's passport, or similar documents.

*Note: Please fill-up the POEA FORM of Affidavit of Termination of Employment (per POEA Memorandum Circular No. 4, Series of 2020) and indicate therein the most **RECENT** employment contract duration. Do not include the whole service record at the company.*

Please input your personal details in the visitor/request slip:

NAME
ADDRESS
MOBILE NUMBER
E-MAIL ADDRESS

Welfare Services Branch
2/F POEA
Look for Ms. Sheryl Andaya



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MEMORANDUM CIRCULAR No. 24
Series of 2020

TO : All Concerned

SUBJECT : Issuance of Certification of POEA Offices to Implement the Unemployment Insurance Benefit of Qualified Overseas Filipino Workers under the Social Security Act of 2018

Pursuant to *Republic Act No. 11199, otherwise known as the Social Security Act of 2018*, and in line with the *Department of Labor and Employment (DOLE) Department Circular No. 01, Series of 2019*, the following guidelines are issued by this Administration to facilitate the implementation of unemployment insurance or involuntary separation benefit for qualified landbased and seabased overseas Filipino workers (OFWs) of the Social Security System (SSS).

I. Coverage. The Guidelines provided in this Memorandum Circular specifically covers and implements Section 14-B of the Social Security act of 2018, as follows:

Sec. 14-B. *Unemployment Insurance or Involuntary Separation Benefits.* - A member who is not over sixty (60) years of age who has paid at least thirty-six (36) months contribution twelve (12) months of which should be in the eighteen-month period immediately preceding the involuntary unemployment or separation shall be paid benefits in the form of monthly cash payments equivalent to fifty percent (50%) of the average monthly salary credit for a maximum of two (2) months: *Provided, That an employee who is involuntarily unemployed can only claim unemployment benefits once every three (3) years: Provided, further, That in case of concurrence of two or more compensable contingencies, only the highest benefit shall be paid, subject to the rules and regulations that the Commission may prescribe.*

II. Definition. For purposes of implementing this Memorandum Circular, *involuntary unemployment or involuntary separation from work* shall refer to the situation where an OFW became unemployed due to: (1) economic downturn, (2) natural or human-induced calamities/disasters, (3) authorized causes of termination including termination due to installation of labor-saving devices, redundancy, retrenchment or downsizing, and closure or cessation of operations, and (4) other analogous cases as may be determined by the DOLE.

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III. Functions of Focal Points at the POEA. In line with DOLE Department Circular No. 01 Series of 2019, the main function of the POEA shall be to complement the efforts of the DOLE and other authorized agencies under it in the issuance of DOLE Certification for OFWs applying for the benefit defined herein.

The Welfare and Employment Office (WEO) shall serve as the central coordinating, monitoring, and supervising unit for the issuance of DOLE/POEA Certification.

IV. Requirements and Arrangements for the Issuance of DOLE/POEA Certification

1. ***Venue for Filing of Application for Certification.*** Qualified OFWs may file their application for DOLE/POEA certification at the POEA Central Office, any One-Stop Service Center for OFWs (OSSCO), POEA Regional Center, POEA Satellite Office (RSO) or Regional Extension Unit (REU).

The application for certification shall be subject to the existing appointment system, if applicable, in the respective venues for the filing of such application.

2. ***Requirements for Application for Certification.*** Applicants shall be required to bring:

- a. at least one (1) valid I.D. and
- b. copy of the Notice of Termination issued by the employer indicating any of the causes of involuntary unemployment mentioned in item II or a duly notarized Affidavit of Termination of Employment in the absence of Notice of Termination. The Affidavit of Termination should be supported by proof of the OFW's arrival to the Philippines such as stamp of arrival by the Bureau of Immigration in the OFWs passport, or other similar documents.

3. ***Authority to Sign and Issue Certification.*** The following officials are hereby authorized to sign and issue the POEA Certification required for the application of OFWS for unemployment insurance or involuntary separation benefit:

- a. For the POEA Main Office:
 - a.1 Director, Welfare and Employment Office (WEO)
 - a.2 Director, Welfare Services Branch (WSB)
- b. For Luzon: Head, POEA Regional Center for Luzon (RCL) or officers duly delegated by the Administration

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- c. For Visayas: Head, POEA Regional Center for Visayas (RCV) or officers duly delegated by the Administration
 - d. For Mindanao: Head, POEA Regional Center for Mindanao (RCM) or officers duly delegated by the Administration
4. **Endorsements and Reporting.** OSCCOs, RSOs or REUs without authorized signatories that have received applications for certification shall endorse such applications to their respective Regional Centers for approval. To facilitate such endorsements, arrangements for electronic submissions between concerned offices shall be established and operationalized.

All certifications issued and signed by authorized regional offices within a given month shall be duly reported to the Director of POEA-WEO on or before the 5th working day of the following month.


V. **Forms.** Attached to this Memorandum Circular for ready reference are the following forms:

- 1. For Landbased OFWs:
 - 1.a Affidavit of Termination of Employment for Landbased OFWs
 - 1.b POEA Certification for Landbased OFWs
- 2. For Seabased OFWs:
 - 2.a Affidavit of Termination of Employment for Seabased OFWs
 - 2.b POEA Certification for Seabased OFWs

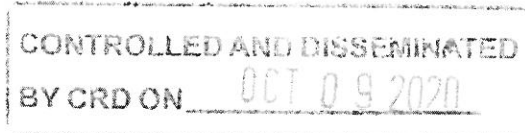
VI. **Application for unemployment insurance or involuntary separation benefit at SSS.** Upon issuance of the DOLE/POEA certification by the concerned POEA office, the OFW may proceed to the designated SSS Office for application of the unemployment insurance or involuntary separation benefit.

VII. **Effectivity and Amendments.** This Circular shall take effect immediately and may be subject to further amendments.

For strict compliance.


BERNARD P. OLALIA
Administrator

___ October 2020



_____, S.S

x-----x

AFFIDAVIT OF TERMINATION OF EMPLOYMENT

I, _____, Filipino, of legal age, single/married, with residence/postal address at _____, after having been sworn in accordance with law, hereby depose and state that:

1. I am a *bona fide* member of the Social Security System (SSS) with assigned SSS Number _____;
2. I am a landbased overseas Filipino worker (OFW) as defined under RA 11199 otherwise known as the Social Security Act of 2018;
3. I was deployed by [name of Philippine recruitment / manning agency] : _____ with office address at _____ to work overseas for its accredited employer/principal [name of accredited employer/ principal] with office address at _____ with a signed employment contract from _____ to _____;
4. I was terminated from employment effective _____ due to _____;
5. I cannot secure a Notice of Termination from employer; and
6. I am executing this affidavit to attest to the truth and veracity of the foregoing statements and to support my application for unemployment insurance or involuntary separation benefit.

IN WITNESS WHEREOF, I hereby set my hand and affix my signature this _____ at _____, Philippines.

AFFIANT
(Signature over Printed Name)

SUBSCRIBED AND SWORN to before me this _____ at _____
Affiant exhibiting to me his/her valid government ID _____ issued on _____ at _____ and valid until _____.

Doc. No. _____;
Page No. _____;
Book No. _____;
Series of 20 _____

Letterhead of Issuing Office

CERTIFICATION

This is to certify that based on the records of this Administration, Mr./ Ms. _____ is a landbased overseas Filipino worker (OFW) deployed by [*name of Philippine licensed recruitment agency*]: _____ with office address at _____ for its accredited employer/principal [*name of accredited employer/principal*] with office address at _____, with a signed employment contract from _____ to _____;

This certification is being issued as a requirement for the application of unemployment insurance or involuntary separation benefit of said OFW.

_____, Philippines. _____ 2020.

POEA Director/Head, Regional Center

_____-2020-09-30-001-POEA
(*Region-Year- Month- Date-Number of Certification-POEA*)

_____, S.S

X-----X

AFFIDAVIT OF TERMINATION OF EMPLOYMENT

I, _____, Filipino, of legal age, single/married, with residence/postal address at _____, after having been sworn in accordance with law, hereby depose and state that:

1. I am a *bona fide* member of the Social Security System (SSS) with assigned SSS Number _____;
2. I am a seabased overseas Filipino worker (OFW) as defined under RA 11199 otherwise known as the Social Security Act of 2018;
3. I was deployed by [name of Philippine licensed manning agency] : _____ with office address at _____ for its accredited employer/principal [name of accredited employer/principal] with office address at _____, and was assigned to the vessel [name of vessel] _____ with a signed employment contract from _____ to _____;
4. I was terminated from employment effective _____ due to _____;
5. I cannot secure a Notice of Termination from employer; and
6. I am executing this affidavit to attest to the truth and veracity of the foregoing statements and to support my application for unemployment insurance or involuntary separation benefit.

IN WITNESS WHEREOF, I hereby set my hand and affix my signature this _____ at _____, Philippines.

AFFIANT
(Signature over Printed Name)

SUBSCRIBED AND SWORN to before me this _____ at _____
Affiant exhibiting to me his/her valid government ID _____ issued on _____ at _____ and valid until _____.

Doc. No. _____;
Page No. _____;
Book No. _____;
Series of 20 _____

Letterhead of Issuing Office

CERTIFICATION

This is to certify that based on the records of this Administration, Mr./ Ms. _____ is a seabased overseas Filipino worker (OFW) deployed by [*name of Philippine licensed manning agency*]: _____ with office address at _____ for its accredited employer/principal [*name of accredited employer/principal*] with office address at _____, and was assigned to the vessel [*name of vessel*] _____ with a signed employment contract from _____ to _____;

This certification is being issued as a requirement for the application of unemployment insurance or involuntary separation benefit of said OFW.

_____, Philippines. _____ 2020.

POEA Director/Head, Regional Center

_____-2020-09-30-001-POEA
(*Region-Year- Month - Date - Number of Certification-POEA*)