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| **PHILIPPINE TOURISM AWARDS** | |
| **APPLICATION FORM** | |
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| **DATA PRIVACY NOTICE** | |
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| The Department of Tourism, in line with Republic Act 10173 or the Data Privacy Act of 2012, is committed to protect and secure personal information obtained in the performance of its mandate under The Tourism Act of 2009. Pursuant to its mandate, the Department collects the following personal information: (i) full name of applicant or its official representative, (ii) home/office address, (iii) e-mail address, (iv) contact numbers, (v) nationality, (vi) financial information, and other personal information relevant in the processing of Award applications and other DOT applications.  In compliance with the requirements of Data Privacy Act of 2012, the Department commits to ensure that all personal information obtained will be secured and remain confidential. Collected personal information will only be utilized for purposes of processing of applications, documentation, research, if applicable, and facilitation of future transaction. The personal information shall not be shared or disclosed with other parties without consent unless the disclosure is required by, or in compliance with applicable laws and regulations.  Only the agency’s designated personnel/Personal Information Controllers will have access to the collected personal information, which will be stored for three (3) years after the expiration of accreditation or after the completion of relevant transaction. The manner of disposition of physical documents will be based on the provision of the National Archive of the Philippines and/or deletion in the agency’s database. Corrections of personal information or withdrawal of data privacy consent, if given, is done by informing the Department in writing through privacy@tourism.gov.ph. | |
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| **TOURIST LAND TRANSPORT OF THE YEAR** | |
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| This award is presented to a TOURIST LAND TRANSPORT OPERATOR who has consistently provided outstanding service through reliable, efficient, and enjoyable land transportation solutions and with a strong commitment to enhancing the travel experience for tourists. | |
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| **ACCREDITATION DETAILS** | |
| *Please be informed that only DOT-accredited Tourist Land Transport Operator may apply for this award. Kindly ensure to provide the correct accreditation details.* | |
| DOT Accreditation Number | Click or tap here to enter text. |
| DOT Classification / Category | Choose an item. |

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| **COMPANY PROFILE** | |
| Full Business Name | Click or tap here to enter text. |
| Region | Choose an item. |
| Contact Details | Click or tap here to enter text. |
| Email Address  *All official communications regarding the Awards shall be communicated through the email address provided herein.* | Click or tap here to enter text. |
| Year Established | Click or tap to enter a date. |
| Total No. of Vehicle Units in the Fleet | Click or tap here to enter text. |

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| **DOCUMENTARY REQUIREMENTS** | | |
| ​​☐​ | Brief Company Profile | Attach as Annex A |
| ​​☐​ | Audio-Visual Presentation showcasing the company’s compliance on awards criteria (maximum of 3 minutes) | Attach as Annex B |
| ​​☐​ | Latest Income Tax Return (FY 2022/2023) | Attach as Annex C |

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| **SUMMARY OF APPLICATION** | |
| ***General Instructions:***  *Please provide a short narration (maximum of 800 characters) of your property's compliance with the indicators specified below.* | |
| **QUALITY OF FACILITIES AND SERVICES** | |
| Condition and Maintenance of Vehicle Units  *Briefly discuss the current composition of your fleet and the system by which the company ensure that the vehicle units in the fleet are maintained and their condition are monitored.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| Qualification of Drivers  *Briefly discuss the current policy of the company on hiring and selection Tourist Drivers.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| Training Programs for Drivers  *In order to ensure that the Drivers are well capacitated to handle variety of tourists, describe the training programs laid out for your tourist drivers within your company. Include both internal and external trainings being implemented by the company.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| Guest Commendation/Testimonial  *Provide an overview of summary of Guest feedback in the past three (3) years.*  *Please write N/A if not applicable.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| Handling of Complaints  *Provide the process by which your company handle complaints. Cite one of the most erring complaint received by your property and how was it handled and eventually resolved.*  *Please write N/A if not applicable.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| **Quality of Facilities and Services**  *Please attach relevant documents as proof and/or evidences to support the application.*(Attach as Annex D) | |
| **OPERATIONAL PERFORMANCE** | |
| **Financial Performance** | |
| Average Growth Rate  *Provide an overview of the financial performance of the company by describing the trend or the average growth rate of the company within the last five (5) years.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| Investments  *Briefly describe the types and form investment poured in by the company including short term plans for expansion and/or modernization of fleet among others. Include in the attachment quantifiable proof/evidences for such investments.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| **Passenger Safety** | |
| Extent of Insurance Policy Coverage  *To ensure passenger safety, is there an existing insurance policy that provides comprehensive coverage for passengers in cases of unforeseen events? If there is, please expound the extent of the coverage.*  *Please write N/A if not applicable.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| Accident Incidence  *Has there been accident/s or any incidence, whether vehicular or non-vehicular, that involved any one of your drivers or units? If there is any, describe the incident/accident and how was it handled.*  *Please write N/A if not applicable.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| Onboard Safety Measures and Policies Implemented  *Explain the current practice to ensure tourists safety onboard.*  *Please write N/A if not applicable.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| Safety-related Training for Drivers  *Id\ntify the safety-related training for drivers in your pool, its frequency including the percentage rate of drivers completed trainings.*  *Please write N/A if not applicable.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| **Operational Performance**  Please attach relevant documents as proof and/or evidences to support the application. (Attach as Annex E) | |
| **FILIPINIZATION/CONTRIBUTION TO THE FILIPINO BRANDING** | |
| Employees Training on Filipino Brand of Service Excellence  *Identify the percentage rate of employees duly trained under the Filipino Brand of Service Excellence Training Program.*  *Please write N/A if not applicable.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| Efforts undertaken to integrate Filipino element in the Delivery of Services  *Briefly discuss the actual company’s effort to integrate Filipino elements in the operations.*  *Please write N/A if not applicable.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| **Marketing and Promotions** | |
| Extent of Promotional Efforts of Philippine Tourism Destination thru on-board promotions.  *Elaborate on the existing initiatives of the company to integrate information campaign drive for Philippine tourism destination/s thru on-board promotions.*  *Please write N/A if not applicable.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| **Filipinization/Contribution to the Filipino Branding**  *Please attach relevant documents as proof and/or evidences to support the application.* (Attach as Annex F) | |
| **GREEN PRACTICES/CONTRIBUTION TO SUSTAINABILITY** | |
| Percentage of Fleet are E-Vehicle | |
| Choose an item. | |
| Digitalization Initiatives  *Describe the technological innovations embraced by the company that resulted to a greener practice within the organization.*  *Please write N/A if not applicable* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| Compliance with Smoke Emission Testing  *Expound on the percentage of fleet, frequency of the emission testing or any existing company standard procedure to ensure that the vehicles in the fleet are compliant with the smoke emission testing.*  *Please write N/A if not applicable* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| Environmental Protection Programs/ Initiatives  *Identify the company’s programs and initiatives towards environmental protection. Please write N/A if not applicable* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| **Green Practices / Contribution to Sustainability**  *Please attach relevant documents as proof and/or evidences to support the application.* (Attach as Annex G) | |
| **CORPORATE SOCIAL RESPONSIBILITY / CONTRIBUTION TO INCLUSIVITY & RESILIENCY** | |
| Beneficiaries of Corporate Social Responsibility Activities  *Describe the company's CSR programs implemented during the years in consideration. Identify the intended beneficiaries vs the actual result of the CRS program.*  *Please write N/A if not applicable.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| Other engagements within the community  *Elaborate on community engagement of the company that shows it support to the community building and socio-economic growth*  *Please write N/A if not applicable.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| Support to DOT Activities and Advocacies  *Briefly discuss the company's efforts to align and support the DOT's thrusts and advocacies. Cite concrete activities and programs participated in and/or initiated.*  *Please write N/A if not applicable.* (maximum of 800 characters) | |
| Click or tap here to enter text. | |
| **Corporate Social Responsibility / Contribution to Inclusivity & Resiliency**  *Please attach relevant documents as proof and/or evidences to support the application.* (Attach as Annex H) | |
| **CERTIFICATION** | |
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| I certify that I am duly authorized to accomplish this application form and that the information provided herein are true, correct and complete statements to the best of my knowledge and in compliance with the provisions of pertinent laws, rules, and regulations of the Republic of the Philippines.  I also hereby authorize the Philippine Department of Tourism and the Awards Secretariat to verify the accuracy of the above information provided. | |
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| Complete Name | Click or tap here to enter text. |
| *The name provided shall be the official Authorized Person to represent the company for all matters pertaining to the Award Application. All DOT communication shall be addressed to the Authorized Representation.* | |
| Designation | Click or tap here to enter text. |

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| **DATA PRIVACY CONSENT FORM** |
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| I, the applicant and/or representative of (the Company), acknowledges that I have read and understood the Data Privacy Notice of the Department of Tourism. In relation thereto, consent is hereby voluntarily given to the Department of Tourism to use, share, and disclose relevant personal information and sensitive personal information, given and/or disclosed in the application form or any DOT standard forms /documents only for the following purposes   * To evaluate the eligibility and qualification for the Philippine Tourism Awards; * To attest and validate the accuracy of the provided information; and * To include in the marketing and promotional efforts of the agency (e.g. publication of the official awardees in Dot website, in print materials, etc.)   Yes, I consent  No, I do not consent |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Signature over Printed Name  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date |