

**AGREEMENT ON SOCIAL SECURITY
BETWEEN
THE REPUBLIC OF THE PHILIPPINES AND THE PORTUGUESE REPUBLIC
CERTIFICATE OF APPLICABLE LEGISLATION**

1. Information about the employee or self-employed person

Name (Surname, Given name, Middle name)	Nationality
Philippine Social Insurance Number SS No. _____ GSIS No. _____	Date of birth (MM/DD/YYYY)

2. Information about the establishment / self-employed in the Philippines

Name of employer / self-employed	Address of employer / self-employed
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3. Information about the establishment / self-employed in Portugal

Name of employer / self-employed	Address of employer / self-employed
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4. Certification of Philippine Competent Authority

In accordance with Article 9 of the Agreement and Art. 6 of the Administrative Arrangements, the employee or self-employed person named above shall remain subject to the legislation of the Philippines:

from _____ until _____.

5. Authorized officer

Date	Signature	Official seal/stamp
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Copy each to:

1. Employer

2. Employee or Self-employed

3. Counterpart competent authority

4. SSS/GSIS