



REPUBLIC OF THE PHILIPPINES

OFFICE OF THE PRESIDENT

**DANGEROUS DRUGS BOARD**

**Annex “B”**

THE HONORABLE  
**Undersecretary EARL P. SAAVEDRA, CESO I**  
Executive Director V  
Dangerous Drugs Board  
3<sup>rd</sup> Flr., DDB-PDEA Bldg., NIA Northsite  
Road, National Govt. Center, Brgy., Pinyahan,  
Quezon City

**SUBJECT: APPLICATION FOR VOLUNTARY CONFINEMENT FOR  
TREATMENT AND REHABILITATION**

**SIR:**

I am \_\_\_\_\_, of legal age, Filipino and  
*(name of applicant-drug dependent)*  
resident of \_\_\_\_\_.  
*(complete address)*

I am a victim of drug abuse, having used \_\_\_\_\_ for  
*(kind of drug/s used)*  
the past \_\_\_\_\_ months/years. I have realized the dangers and ill-effects of drug  
abuse, and for which reason, I wish to voluntarily submit myself for confinement for  
treatment and rehabilitation at the \_\_\_\_\_  
*(name and address of drug treatment*  
\_\_\_\_\_  
*and rehabilitation center)*

under Section 54, R. A. 9165, otherwise known as “The Comprehensive Dangerous  
Drugs Act of 2002 and Board Regulation No. 3, Series of 2007”. This is my \_\_\_\_\_  
time to submit myself for treatment and rehabilitation.

For the Board’s favorable consideration.

\_\_\_\_\_  
*Name and Signature of Applicant -  
Drug Dependent*

**VERIFICATION**

I, \_\_\_\_\_, of legal age, Filipino, and with residence and postal address at \_\_\_\_\_, after having been duly sworn to in accordance with law, hereby depose and state:

1. That I am the applicant for the voluntary confinement for treatment and rehabilitation under Section 54, RA 9165, otherwise known as *The Comprehensive Dangerous Drugs Act of 2002, and Board Regulation No. 3, Series of 2007*;
2. That I have read and fully understood the contents of my application, finding them true and correct according to my own knowledge, information and belief.

\_\_\_\_\_  
***Name and Signature of Affiant***

**SUBSCRIBED AND SWORN** to before me this \_\_\_\_ day of \_\_\_\_\_, 2023 in \_\_\_\_\_, affiant exhibited to me his/her ID with No. \_\_\_\_\_ issued at \_\_\_\_\_ on \_\_\_\_\_.

**NOTARY PUBLIC**

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**APPROVED / DISAPPROVED:**

\_\_\_\_\_  
Duly Authorized DDB Representative