



REPUBLIC OF THE PHILIPPINES
OFFICE OF THE PRESIDENT

DANGEROUS DRUGS BOARD

THE HONORABLE
Undersecretary EARL P. SAAVEDRA, CESO I
Executive Director V
Dangerous Drugs Board
3rd Floor, 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

Doc. No. _____
Page No. _____
Book No. _____
Series of **2023**

APPROVED / DISAPPROVED:

Duly Authorized DDB Representative