CRMD Form No. 092300-mldl

GSIS MEMBER'S REQUEST FORM

This form has to be filled up by the attending MSO/AVO

Date: _____ Time: _____

Name: _____
(please write full name with middle initial)

GSIS Policy No./Retirement No.: _____ GSIS ID NO. _____

Agency/Office & Address: _____

Mailing Address: _____

Tel. No. (Office Landline): _____ Residence Landline: _____

Fax Number: _____ Cellphone No.: _____

E-mail Address: _____

NATURE OF REQUEST, QUERY OR COMPLAINT

Loan Transactions	Date Filed
☐ Consolidated Loan	
☐ Policy Loan	
☐ Housing Loan	
☐ Refund/Recomputation	
☐ Request for GSIS Clearance	
☐ Others:	

Membership Transactions	Date Filed
☐ Issuance of policy of new member	
☐ Re-insurance	
☐ Conversion of Life Policy (ELP)	
☐ Request for duplicate copy of contract	
☐ Change of name/status/birth	
☐ Others	

For Dep-Ed Employees	Date Filed
☐ Request for stoppage of loan deduction	
☐ Request for deduction of loan amortization	
E-SERVICES	**Date Filed**
☐ Loan	
☐ Old Age Pension	
☐ Survivorship Pension	
☐ Resumption of Pension	
☐ Home Visit of Pensioner	
☐	
Release of Ecard	
Others	

CLAIMS	Date Filed
☐ CSV	
☐ Maturity	
☐ Retirement/Survivorship	
☐ Burial	
☐ Death Claim	
☐ CEAP	
☐ HIP	
☐ Pre-need	
☐ EC	
☐ OLID	
☐ Disability	
☐ Recomputation	

POSTING	Date Filed
☐ Premium Payments	
☐ Loan Repayments:	

Specify Type of Loan and payment month and year

Details of the Request:

MAO's Analysis and Recommendation:

Signature over full name of transacting member

Signature over full name of attending MSO