

19 October 2009

FOR : ALL PARTICIPATING RURAL BANKS

FROM : Tomas S. Gomez IV, Chairman

**SUBJECT : CIRCULAR LETTER: SEMINAR-WORKSHOP ON
CORPORATE GOVERNANCE & RISK MANAGEMENT
FOR RB DIRECTORS**

Dear Fellow Rural Bankers:

The Rural Bankers Association of the Philippines (RBAP), through the *Rural Bankers' Research and Development Foundation, Inc. (RBRDFI)* is pleased to announce that it will conduct a seminar-workshop, as part of its continuing strategy to strengthen the rural banking industry.

**Course Title: Seminar-workshop on Corporate Governance
& Risk Management for RB Directors**

**Venue: RBAP Conference Room, RBAP Bldg., A. Soriano Ave.,
Cor. Arzobispo St., Intramuros, Manila**

Schedule: November 12-13, 2009 (Thursday-Friday)

Duration: 2 days (8:30AM – 5:30PM)

Pursuant to BSP Circular No. 296 prescribing the minimum qualifications of a bank director, a director '*must have attended a special seminar for board of directors conducted or accredited by BSP...That incumbent directors as well as those who will be elected...must attend said seminar within a period of six (6) months...from the date of their election*'. Rural bank directors are mandated by the said circular in order to improve and strengthen corporate governance of their banks.

Registration fee is **Four Thousand Four Hundred Pesos only (P4, 400.00)***. Early bird registrants (those who pay on or before October 30, 2009) are entitled to a 5% discount from the registration fee or will only pay PhP4, 180.00.

Should these arrangements meet your approval, we thereby request you to submit to us not later than **November 09, 2009** the following:

1. A non-refundable down payment of P2, 200.00 per participant. Payments can be remitted to the **Rural Bankers Research and Development Foundation, Inc.** bank

** Non-member rural banks will be charged thrice the regular registration fee. To avail of the regular registration fee, non-member banks are encouraged to apply for membership with RBAP/RBRDFI. Please call RBAP for details.*

account (*Land Bank of the Philippines – Intramuros Branch Savings Account Number 0012-1046-26*). Proof of payment (i.e., deposit slip) should be sent immediately to RBAP via fax for verification. Our fax number is (02) 527-2969 **For check payments, payable to Rural Bankers Research and Development Foundation, Inc (RBRDFI);**

1. Nomination form of the participant(s) duly endorsed by the bank's authority;
2. Filled-up Participant's Profile.

Please be advised that we will be accepting up to thirty (30) participants only. We reserve the right to limit the number of participants to a manageable level. Participants will be accepted on a first-come-first-served basis.

Participants who have paid but fail to show up for the seminar will only be entitled to a rebate of 50% of the total registration fee.

Thank you very much.

PARTICIPANT'S PROFILE SHEET

**SEMINAR-WORKSHOP ON CORPORATE GOVERNANCE
& RISK MANAGEMENT FOR RB DIRECTORS**

**Date: November 12- 13, 2009 (Thursday and Friday)
Venue: RBAP Conference Room, A. Soriano Ave. cor. Arzobispo St.,
Intramuros, Manila**

PRINTED NAME:

_____ *FirstName* *M.I.* *Surname*
NICKNAME: _____ **BIRTHDAY:** _____

RURAL BANK: _____

RB COMPLETE ADDRESS: _____

RB TEL. NO(S): _____ **RB FAX NO:** _____

E-MAIL ADDRESS: _____ **MOBILE NO** _____

EDUCATIONAL BACKGROUND

	Course/Degree	Institution	Year Graduated
PostGraduate			
College			

WORK EXPERIENCE: (Last 2 including Current Employment)

Company	Inclusive Year(s) of Employment	Position(s) Held

**RURAL BANKERS RESEARCH &
DEVELOPMENT FOUNDATION, INC.**

NOMINATION FORM

Seminar Title:	Seminar-workshop on Corporate Governance & Risk Management For RB Directors	Date:	November 12-13, 2009	Time:	8:30AM to 5:30PM
Venue:	RBAP Conference Room A. Soriano Ave. cor Arzobispo St., Intramuros, Manila				

To be completed by the employer/nominating agency/project leader

1. Employing office institution _____
2. Postal address of employing office/institution _____
3. Phone no/s. _____
4. Facsimile no/s. _____
5. E-mail Address: _____
6. Name/s and exact position/s held by nominee/s

Name	Position
1.	
2.	
3.	

_____ Date

Signature Over Printed Name/
Position/President/Personnel Manager