

**NATIONAL ANTI-POVERTY COMMISSION
ENHANCING ACCESS OF THE POOR TO MICROFINANCE SERVICES
IN FRONTIER AREAS**

Questionnaire for Microfinance Institutions(MFIs)

DATE:
TIME STARTED:
TIME ENDED:
ENUMERATORS NAME:

TO BE FILLED UP BY THE RESPONDENT(S)

1. Name of the Organization: _____
2. Acronym: _____
3. Address: _____
(building number , street, zip code)
4. _____
City/town/municipality
5. Province: _____
6. Telephone (Area Code) _____ (Office) _____ (Cell) _____
7. Fax Number: _____
8. E-mail Address: _____

POSITION(S) OF RESPONDENT(S) AND NAME(S):

- 9.
- 10.
- 11.

To be filled up by Enumerator(Branch Level):

12. What percentage of the surrounding area has electricity _____ %

Availability of communication facilities

13. Land line connection: yes.....1 no.....2

14. Cellphone services: yes.....1 no.....2

15. MFIs Branch office approximate distance (in kilometers) to nearest client(s) _____ kms.

16. Is there regular land transportation (indicated by public transport such as jeepneys, tricycles, other means of road transport) yes.....1 no.....2

17. What percent of your clients walk to your office or meeting location? _____ %

MODULE I- VISION,MISION,GOVERNANCE & MICROFINANCE OPERATIONS

I. ORGANIZATIONAL ASPECTS

A. ORIGIN AND MISSION

What year was your organization

18. founded? _____

19. registered? _____

20. Do you have a mission statement? (yes=1 no=2) _____

If yes, may I have a copy please.

B. REGISTRATION

Is your organization registered with :

21. Cooperative Development Authority (yes=1 no=2) _____

22. Securities and Exchange Commission (yes=1 no=2) _____

23. Bangko Sentral ng Pilipinas (yes=1 no=2) _____

C. BOARD OF DIRECTORS

24. Do you have a Board of Directors? (yes=1 no=2)	25. Number of members	26. Selection Process (1=Elected, 2=Appointed, 3=Invited/ Independent)	27. Service Term (1=1year, 2=2 years, 3=Other)	28. Number of Consecutive Terms Permitted
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29. How many times has the Board met in the last 12 months? _____

Which of the following are existing Board committees? (yes=1 no=2)	If yes, number of meetings in the past 12 months
30. Audit Committee	31.
32. Risk Management Committee	33.
34. Governance Committee	35.
36. Others	37.

If others, please specify:

D. AFFILIATIONS

Is your organization affiliated with the following: (yes=1 no=2)

Local Federations/Associations/Networks

- 38. Microfinance Council of the Philippines (MCPI) _____
- 39. Rural Bankers Association of the Philippines (RBAP) _____
- 40. National Confederation of Cooperatives in the Philippines (NATCCO) _____
- 41. Others/Regional Federations (Please Specify) _____

International Network Organizations

- 42. OPPORTUNITY International (yes=1 no=2) _____
- 43. Women’s World Banking (yes=1 no=2) _____
- 44. Grameen Trust (yes=1 no=2) _____
- 45. Others(Please Specify)_____

Have you ever received financial capital or subsidy for your organization from: (yes=1 no=2)

- 46. international donor/ funding agencies: _____
- 47. government _____
- 48. religious organization/foundation _____
- 49. international non-government organization (NGO) _____
- 50. other grants, donations or subsidies _____

E. MFI PROFILE

What services do you offer (yes=1 no=2):

51. Loans _____

Savings:

52. passbook savings _____

53. term deposits _____

54. required savings linked to loans (capital build up) _____

55. Remittances: _____

Insurance:

56. health _____

57. life _____

58. accident _____

59. non-life (e.g. property) _____

60. others(specify)_____

Training:

61. Financial literacy _____

62. Business Development Support (BDS) Services: _____

63. Gender and social issues _____

64. Health and nutrition _____

65. Environment _____

66. Other training: _____

67. Other Services

Please specify _____

If not yet provided, do you plan to offer (yes=1 no=2):

68. Loans _____

Savings:

69. passbook savings _____

70. term deposits _____

71. required savings linked to loans (capital build up) _____

72. Remittances: _____

Insurance:

73. health _____

74. life _____

75. accident _____

76. non-life (e.g. property) _____

Training:

77. Financial literacy _____

78. Business Development Support (BDS) Services: _____

79. Gender and social issues _____

80. Health and nutrition _____

81. Environment _____

82. Other training: _____

83. Other Services

Please specify _____

Is this the

84. main office (yes=1 no=2) _____

85. branch office (yes=1 no=2) _____

86. main and only office (yes=1 no=2) _____

	For this Office(Branch) (As of June 2005)			For Organization as a Whole (As of June 2005)		
	Present Status	Goal for Next Year	Goal for Next 3 Years	Present Status	Goal for Next Year	Goal for Next 3 Years
a. Number of Offices				87	88	89
Regional Offices				90	91	92
Branches				93	94	95
Extension Offices				96	97	98
Others _____				99	100	101
b. Number of Staff				102	103	104
Senior Manager(s)				105	106	107
Middle Manager(s)				108	109	110
Branch Manager(s)	111	112	113	114	115	116
Bookkeeper(s)	117	118	119	120	121	122
Cashier(s)	123	124	125	126	127	128
Loan Officer(s)	129	130	131	132	133	134
c. Number of areas covered	135	136	137	138	139	140
Provinces	141	142	143	144	145	146
Municipalities	147	148	149	150	151	152
d. Number of Borrowers	153	154	155	156	157	158
% Women	159	160	161	162	163	164
% Men	165	166	167	168	169	170
% Indigenous People(IP)	171	172	173	174	175	176
e. Number of Savers	177	178	179	180	181	182
% Women	183	184	185	186	187	188
% Men	189	190	191	192	193	194
% Indigenous People(IP)	195	196	197	198	199	200
f. Number of Active Clients	201	202	203	204	205	206
g. Amount of Loans Outstanding (₹)	207	208	209	210	211	212
h. Amount of Savings Deposits	213	214	215	216	217	218
i. Amount of Capital Build Up	219	220	221	222	223	224
j. Portfolio at Risk (%)	225	226	227	228	229	230
l. Past Due Ratio(%)	231	232	233	234	235	236

E. BUSINESS DEVELOPMENT PLAN

- 237. Do you have a business or development plan? (yes=1 no=2) _____
- 238. Written _____
- 239. Unwritten _____

- 240. Did you receive any assistance in preparing your business plan? (yes=1 no=2) _____

- 241. Do you need business development support services to achieve your goals? (yes=1 no=2) _____

For effective and efficient service at the branch level, what do you consider, as the optimum level of:

	<u>Group Lending</u>	<u>Individual Lending</u>
Loan Officer to client ratio?	242. _____	243. _____

To attain the future plans, what resources do you need to have or to augment?

(MULTIPLE RESPONSES) (yes=1 no=2)

- 244. Financial resources for re-lending _____
- 245. Financial resources for operating expenses _____
- 246. Financial resources for capacity building _____
- 247. More staff _____
- 248. Better trained staff _____
- 249. Office equipment _____
- 250. Office space _____
- 251. Vehicles _____
- 252. Computer software _____
- 253. Computer hardware _____
- 254. Others (SPECIFY) _____

And from where do you intend to source the financial resources you need? (yes=1 no=2)

- 255. Raising more donor (international) resources _____
- 256. Increasing borrowings from soft loan sources _____
- 257. Increasing borrowings from commercial sources _____
- 258. Raising more CBUs/savings _____
- 259. Deposit mobilization (for banks and coops) _____

TO ASK ABOUT OPERATIONAL AND FINANCAL SELF- SUFFICIENCIES. TO SOME MFIs THIS MIGHT BE A SENSITIVE INFORMATION, BE CAREFUL AND POLITE IN ASKING.

Let's talk about self-sufficiency measures. Based on your current level of operation, would you say that you have attained: (yes=1 no=2)

- 260. Operational Self-sufficiency _____
- 261. Financial Self-sufficiency _____

F. MANAGEMENT of MICROFINANCE OPERATIONS

For which of the following aspects of operation do you have a written manual? (yes=1 no=2)

(MULTIPLE RESPONSES)

262. Personnel _____
 263. Operations _____
 264. Credit Policies and Procedures _____
 265. Audit _____
 266. MIS _____
 267. Accounting _____
 268. Others (SPECIFY) _____

For the following activities, please specify where FINAL decisions are made:

	BOD	Committee	Home Office	Branch	Others (VERBATIM)
269. Deciding on where Expand operations	1	2	3	4	5
270. Hiring of Manager	1	2	3	4	5
271. Hiring of Staff/Loan Officer	1	2	3	4	5
272. Firing of Manager	1	2	3	4	5
273. Firing of Staff/Loan Officer	1	2	3	4	5
274. Approving Staff Promotion	1	2	3	4	5
275. Approving the branch budget	1	2	3	4	5
276. Signing of Cheques	1	2	3	4	5
277. Approve clients' Loan	1	2	3	4	5
278. Releasing loan proceeds	1	2	3	4	5
279. Approving debt write-offs	1	2	3	4	5

	BOD	Committee	Head Office	Branch	Others (Specify_____)
Loan Approval limits	280	281	282	283	284
Loan Disbursement limits	285	286	287	288	289

Performance standard for MFIs:

	Are you familiar? (yes=1 no=2)	Do you use? (yes=1 no=2)
PESO	290	291
CAMELS	292	293
PEARLS	294	295
Coop PESOS	296	297
Others	298	299

If others, please specify _____

In your opinion, what are the problems facing your microfinance institution in serving the hard to reach or frontier areas **(MULTIPLE RESPONSES)** (yes=1 no=2)

- 300. Security/Peace and Order Situation _____
- 301. Travel time to clients _____
- 302. Lack of business opportunities _____
- 303. Lack of basic infrastructure _____
- 304. Inadequate information about clients _____
- 305. Lack of trained personnel _____
- 306. Inadequate financial resources _____
- 307. Others (PLEASE SPECIFY) _____

II. MICROFINANCE STAFF

A. EDUCATION LEVEL AND TRAINING

Please indicate the education background of your microfinance staff (yes=1 no=2)

Educational Attainment	Managers	Accountants/ Bookkeepers	Loan Officers	Cashiers	Other Staff
Some High School	308	309	310	311	312
Completed High School	313	314	315	316	317
Vocational	318	319	320	321	322
Some College	323	324	325	326	327
Completed College	328	329	330	331	332
Some Graduate	333	334	335	336	337
Completed Graduate	338	339	340	341	342
Microfinance Training/Experience	343	344	345	346	347

B. MICROFINANCE STAFF TRAINING

(1=Need, 2=Provided Internally, 3=Provided by Outside Source, 4=Not Applicable/No Need)

	Managers	Accountants/ Bookkeepers	Loan Officers	Cashiers	Other Staff
Financial Management	348	349	350	351	352
Personnel Management	353	354	355	356	357
Computers	358	359	360	361	362
Gender	363	364	365	366	367
Accounting (Advanced)	368	369	370	371	372
Delinquency Collections	373	374	375	376	377
Financial Literacy	378	379	380	381	382
Environmental Risk Assessment	383	384	385	386	387
Basic Orientation on the Job	388	389	390	391	392
Basic Management on MFI Operations	393	394	395	396	397
Branch Operation Course	398	399	400	401	402
Internal Control and Audit Course	403	404	405	406	407
Basic Branch Monitoring and MIS	408	409	410	411	412
Basic Accounting and Record Keeping	413	414	415	416	417
Group and Center Management	418	419	420	421	422
Branch Outreach Management	423	424	425	426	427
Credit Management	428	429	430	431	432
Delinquency Management	433	434	435	436	437
Others (SPECIFY) _____	438	439	440	441	442

B. COMPENSATION AND INCENTIVE SYSTEM

LET'S SHIFT TO THE TOPIC OF COMPENSATION AND INCENTIVES SYSTEM. SOME MICROFINANCE INSTITUTIONS GIVE CASH INCENTIVE TO LOAN OFFICERS BASED ON GOOD COLLECTION RATES. OTHERS GIVE CASH INCENTIVE TO LOAN OFFICERS BASED ON THE NUMBER OF CLIENTS AND COLLECTION RATE.

Which of the following benefits do you have in your organization? (yes=1 no=2)

	Manager	Accountants/ Bookkeeper	Loan Officer	Cashier	Other Staff
Group I Benefits					
Communication Allowance	443	444	445	446	447
Representation Allowance	448	449	450	451	452
Transportation Allowance	453	454	455	456	457
Meal/Food Allowance	458	459	460	461	462
Rice Allowance	463	464	465	466	467
Clothing Allowance	468	469	470	471	472
Group II Benefits					
SSS Membership	473	474	475	476	477
Leave Credits	478	479	480	481	482
13 th Month Pay	483	484	485	486	487
Private Health Care	488	489	490	491	492
Retirement/Pension Plan	493	494	495	496	497
Life Insurance	498	499	500	501	502
Educational Plan	503	504	505	506	507
Salary Loan	508	509	510	511	512
Housing Loan	513	514	515	516	517
Car/Motorcycle Loan	518	519	520	521	522
Group III Benefits					
Profit-Sharing	523	524	525	526	527
Car Plan	528	529	530	531	532
Housing Plan	533	534	535	536	537
Bonuses other than 13 th month pay	538	539	540	541	542
Trainings/Scholarships	543	544	545	546	547
Others (Specify) _____	548	549	550	551	552

Can you please give information on the basic monthly salary provided to your microfinance staff. All information you will provide shall be held confidential.

553. Manager	554. Accountants/ Bookkeeper	555. Loan Officer	556. Cashier	557. Other Staff
1 Below 6,000	1 Below 6,000	1 Below 6,000	1 Below 6,000	1 Below 6,000
2 6,000-10,000	2 6,000-10,000	2 6,000-10,000	2 6,000-10,000	2 6,000-10,000
3 11,000-15,000	3 11,000-15,000	3 11,000-15,000	3 11,000-15,000	3 11,000-15,000
4 16,000-20,000	4 16,000-20,000	4 16,000-20,000	4 16,000-20,000	4 16,000-20,000
5 21,000-25,000	5 21,000-25,000	5 21,000-25,000	5 21,000-25,000	5 21,000-25,000
6 26,000-30,000	6 26,000-30,000	6 26,000-30,000	6 26,000-30,000	6 26,000-30,000
7 Above 31,000	7 Above 31,000	7 Above 31,000	7 Above 31,000	7 Above 31,000

If commissions, raises, or other incentives are offered to staff, please indicate the basis for determining. (yes=1 no=2)

	Manager	Loan Officer	Other staff
Profits	558	559	560
Tenure	561	562	563
Performance appraisal	564	565	566
No. of active clients	567	568	569
Repayment rate	570	571	572
Delinquency rate	573	574	575
Amount of loans disbursed	576	577	578
Amount of loans outstanding	579	580	581
No. of CBU contributors	582	583	584
Judgment of management	585	586	587
Others (SPECIFY) _____	588	589	590

Based on your observations, do you find the incentives for your microfinance staff effective in achieving the following? (yes=1 no=2)

- 591. Increasing number of clients _____
- 592. Increasing CBUs/savings _____
- 593. Lowering client drop out rate _____
- 594. Reducing staff resignation _____
- 595. Improving Portfolio Quality _____
- 596. Others(Specify) _____

597. Do you have a staff appraisal system? (yes=1 no=2) _____

598. In the past 12 months, how was your staff turn-over?

- 1=High
- 2=Moderate
- 3=Low

599. If high turn-over, please describe factors contributing to this.

III. FINANCIAL RESOURCE MOBILIZATION

A. SOURCE OF FUNDS for MICROFINANCE

Please tell me about the sources of your: (MULTIPLE RESPONSES) (yes=1 no=2)

	PRESENT		FUTURE	
	LOAN FUND	OPERATIONAL EXPENSES	LOAN FUND	OPERATIONAL EXPENSES
Grants and donations from donor agencies	600	601	602	603
Grants, donations and contributions from individual donors	604	605	606	607
Deposits	608	609	610	611
CBUs generated from members	612	613	614	615
Stockholders	616	617	618	619
Investment Income (e.g. T-bills, stocks)	620	621	622	623
Soft loans	624	625	626	627
Loans from Commercial Sources	628	629	630	631
Interest Incomes from MF Operations	632	633	634	635
Interest earnings on bank accounts	636	637	638	639
International investors (social & commercial)	640	641	642	643
Others (SPECIFY)	644	645	646	647

D.ACCOUNTING SYSTEMS AND MIS

648. What type of Accounting system does your organization use?

- 1=Cash Basis
- 2=Accrual Method

649. Is your accounting system automated? (yes=1 no=2) _____

650. Do you maintain accounts for your microfinance operations separate from your accounts for your non-microfinance projects? (yes=1 no=2) _____

651. Does your accounting system require each branch(MF Operation) to make its own balance sheet and income and expenses statements? (yes=1 no=2) _____

652. How often does a branch prepare its financial statements? _____

- 1=Monthly
- 2=Quarterly
- 3=Semestral
- 4=Once a year

653. Do you have a Management Information System? (yes=1 no=2) _____

What data do you collect in your system (manual or computerized)? **MULTIPLE RESPONSES**(yes=1 no=2)

654. Number of loans disbursed _____

655. Amount of loans disbursed _____

656. Number of loans outstanding _____

657. Amount of loans outstanding _____

658. Amount of loans repaid _____

659. Amount of loans in arrears _____

660. Aging of loans in arrears _____

661. Portfolio at risk _____

662. Number of active borrowers _____

663. Number of CBU/Savers clients _____

664. Amount of CBU/Savings generated _____

665. Balance sheet _____

666. Income and expense statement _____

667. Number of male clients _____

668. Number of female clients _____

669. Others _____

For others, please specify _____

Who uses the reports generated from your management information system?
(yes=1, no=2, does not apply=3)

- 670.Executive Director _____
- 671.Board _____
- 672.Branch Manager _____
- 673.Donors _____
- 674.Creditors _____
- 675.Others _____

For others, please specify _____

For each group of information, please indicate the frequency of reporting.
(1=Monthly, 2=Quarterly, 3=Semestral, 4=Annual)

- 676.Data on loans _____
- 677.Aging on loans _____
- 678.Data on deposits/CBU _____
- 679.Financial statements _____

E. INTERNAL CONTROL AND AUDITS

Which of the following practices does your organization follow in relation to Audits?
MULTIPLE RESPONSES (yes=1 no=2)

- 680.Employs services of an External Auditor _____
- 681.External Audit is part of compliance to regulators requirements _____
- 682.Internal Audit system in place _____
- 683.A unit or a full-time staff is in charge of Internal Audit _____
- 684.Internal Audit in the branches was regular in the last 12 months _____

- 685.Number of Staff in Internal Audit _____
- 686.Frequency of Internal Audit (No. of times per year) _____

Does your internal audit include: **MULTIPLE RESPONSES** (yes=1 no=2)

- 687.Cash counts petty cash fund _____
- 688.Spot checks bank books and ledgers _____
- 689.Spot checks meetings of groups _____
- 690.Checks if accounting procedures are followed _____
- 691.Checks if loan releasing procedures are followed _____
- 692.Checks if loan documents and requirements are followed _____
- 693.Checks if administrative procedures are followed _____
- 694.Spot checks if reports are accomplished correctly _____
- 695.Verifies loan transactions with sample borrowers _____
- 696.Spot checks if collections are deposited in the bank _____
- 697.Reconciles deposit slips with collection report _____
- 698.Others (please specify)_____

699. Please briefly describe any other internal control measures you practice. (VERBATIM)

700. As a policy, when it comes to managing cash balances, what practices your organization follows **(MULTIPLE RESPONSES)**.

- 1=Minimal balance is kept in the vault or cash box
- 2= Minimal balance is kept in a depository bank
- 3=An officer keeps the cash
- 4=Cash counting is done to reconcile the actual amount available with the record
- 5=Petty cash officer is regularly audited
- 6=Collectors are bonded
- 7=To withdraw funds from the bank, or to issue a check, at least 2 signatures are needed

MODULE II-MICROFINANCE SERVICES AND CREDIT POLICIES

A. LENDING PROGRAMS AND CREDIT POLICIES

What basic lending methodologies are you following? **(MULTIPLE RESPONES)** (yes=1 no=2)

- 701.Grameen Bank _____
- 702.ASA Methodology _____
- 703.Village banking _____
- 704.Individual lending _____
- 705.Others (PLEASE EXPLAIN)_____

TYPE OF LENDING PROGRAM

706.What are the Eligibility Criteria you use in screening clients? **(VERBATIM)**

707.Do you verify? If yes, how?

708.How would you assess the screening process in terms of cost?

- 1 Very expensive
- 2 Somewhat expensive
- 3 Somewhat inexpensive
- 4 Very inexpensive
- 5 Others (SPECIFY) _____

709.How would you assess the screening process terms of its effectiveness for outreach?

- 1 Very effective
- 2 Somewhat effective
- 3 Somewhat ineffective
- 4 Very ineffective
- 5 Others (SPECIFY) _____

Please provide details on the loan terms and conditions:

LOAN TERMS AND CONDITIONS	Product 1	Product 2	Product 3
Minimum Loan Amount			
Maximum Loan Amount			
Loan Purpose			
Maturity (months)			
Interest Rate (indicate % per annum)			
Interest Rate 1=Based on Declining Balance 2= Add-on Interest Computation 3= Others Specify _____			
Interest Payment 1=deducted from loan proceeds 2=not deducted but included in weekly/regular payments 3= not deducted but lumped in final payment			
Fees and Charges (% per loan or if in pesos, specify amount)			
Fees and Charges 1=deducted from loan proceeds 2=not deducted, paid up front 3=included in weekly/regular payments 4 =If others, please specify _____			
Insurance			
1=Death & Accident Benefit 2=Medical & Hospitalization 3=Crops/Livestock/Property 4=Loan Mortgage Redemption 5=If others, please specify _____			
Insurance Payment 1=deducted from loan proceeds 2=not deducted, included in amortization payments 3= not deducted, paid up front 4=lumped in final payment 5=If others, please specify _____			
Other Charges (Specify)			
Penalty Calculation Method: 1=Percentage of Amount Past due 2=Fixed amount 3= If others, please specify _____			

<p>Security /Collateral Required(Multiple Responses) 1=Chattel mortgage 2=Co-maker 3=Pledge of an asset 4=Guarantee of an institution 5=Assignment of Standing crop 6=Post-dated cheque 7=Savings hold out 8=CBU 9=Group guarantee 10= Others If others, please specify _____ _____ 11=No security/collateral</p>			
<p>Payment Mode Indicate if: 1...Daily 2...Weekly 3...Monthly 4...Quarterly 5... Others If others, please specify _____ _____</p>			
<p>Loan Collection Method 1=Group/Center Collection meeting 2=Individual Collection thru collectors 3=Deposit of Loan Payment to MFI depository bank account 4=Over the counter payment to MFI office 5=Others If others, please specify _____ _____</p>			
<p>Processing Time on Loans with complete document for New Loan (No. of Days)</p>			
<p>Processing Time on Loans with complete document for Repeat Loan (No. of Days)</p>			
<p>Does this loan product have: Voluntary Savings Component (yes=1 no=2) Compulsory Savings Component(CBU) (yes=1 no=2)</p>			
<p>If YES, in CBU indicate whether: 1=Fixed amount with Minimum 2=Percentage of Loan Amount 3=Others If others, please specify _____ _____</p>			

Frequency of Contribution of Voluntary Savings or CBU 1=Daily 2=Weekly 3=Monthly 4=Others If others, please specify _____			
Maintaining Balance (Specify Amount or as Percentage of Loan Amount)			
Method of Collection of Savings or CBU 1=Deducted from loan proceeds 2=During loan collection 3=Deposited any time 4=Others If others, please specify _____			
Interest Paid(% per annum) Voluntary Savings CBU/Forced Savings			
Policy on Withdrawal of CBU (Multiple responses) 1=Withdrawable on specified time/days 2=Non-withdrawable until member resigns 3=Withdrawable upon payment of total Loan 4=Others If others, please specify _____			
Documents Required from Clients (Multiple Responses) 1=Photo IDs 2=Government issued IDs 3=Barangay Clearance 4=Business Permits 5=Loan Application 6=Others If others, please specify _____			
Incentives for Prompt Payment (yes=1 no=2) If incentives, please specify _____			

710.What is your definition of a past due loan? (VERBATIM)

711.Have you experienced any late payment problems in the past 12 months (yes=1 no=2)_____

712.What factors do you believe cause the late payment problems? (VERBATIM)

713.What steps did your institution take to resolve these late payment problems? (VERBATIM)

714.Do you consider a loan at risk if one amortization payment is past due? (yes=1 no=2) _____

Based on your organization's standards, what do you consider as problematic loan?

715.Past Due Ratio _____ %

716.PAR _____ %

717.Do you have a loan loss provision policy? That is, do you provide allowance for doubtful accounts and bad debts? (yes=1 no=2) _____

718.(IF YES) Please explain briefly your loan loss provision policy (**VERBATIM**)

Do you have written guidelines for any of the following areas? **(MULTIPLE RESPONSES)**

(yes=1 no=2)

- 719. Operations _____
- 720. Credit policies, procedures _____
- 721. Savings and CBU policies _____
- 722. Client training _____
- 723. Others (Please specify) _____

C. CLIENTELE/MARKET

Do you target any of the following specific groups of clients? (yes=1 no=2)

- 724. Gender: Male _____ Female _____ Both Male & Female _____
- 725. Geographic location: Rural _____ Urban _____ Both Rural & Urban _____
- 726. Indigenous People _____
- 727. Basic Sectors _____

728. Do you reach out to hard to reach areas? (yes=1 no=2) _____

729. In your estimate, what percentage of total potential market/clients do you currently reach through microfinancial services? _____%

730. In your estimate, what percentage of total potential market/clients in hard to reach areas do you currently reach? _____%

731. Do you conduct area scanning or market study before you enter a new area? (yes=1 no=2) _____

732. Are you monitoring the impact of your microfinance activities on your clients? (yes=1 no=2) _____

733. What impact indicators do you use? **(MULTIPLE RESPONSES)**

- 1=Family income
- 2=Savings
- 3=Assets
- 4=Growth of business
- 5=Employment generation
- 6=Number of microenterprises
- 7=Others (please specify) _____

734. How does your organization use the results?

735. When clients access your financial services, what information/forms do you provide to ensure that they are well informed of their rights and obligations? (OPEN ENDED)

1 _____
2 _____
3 _____
4 _____
5 _____

736. Do you consult clients to make your MFI's policy directions responsive to their needs? (yes=1 no=2)

737. Are there mechanisms in your organization to ensure that clients' interests are represented? (yes=1 no=2) _____

If YES, what are these? _____

738. What factors do you consider in designing financial services for your clients? (ALLOW MULTIPLE RESPONSES) _____

- 1=Profitability
- 2=Feedback from clients
- 3=What our target market demands
- 4=Mandate of institution
- 5=Others (please specify) _____

MFI PROFILE (TO BE GIVEN TO MFI SEPARATELY)

	For this Office(Branch) (As of June 2005)			For Organization as a Whole (As of June 2005)		
	Present Status	Goal for Next Year	Goal for Next 3 Years	Present Status	Goal for Next Year	Goal for Next 3 Years
Number of Offices						
Regional Offices						
Branches						
Extension Offices						
Others _____						
Number of Staff						
Senior Manager(s)						
Middle Manager(s)						
Branch Manager(s)						
Bookkeeper(s)						
Cashier(s)						
Loan Officer(s)						
Number of areas covered						
Provinces						
Municipalities						
Number of Borrowers						
% Women						
% Men						
% Indigenous People(IP)						
Number of Savers						
% Women						
% Men						
% Indigenous People(IP)						
Number of Active Clients						
Amount of Loans Outstanding (₱)						
Amount of Savings Deposits						
Amount of Capital Build Up						
Portfolio at Risk (%)						
Past Due Ratio(%)						

A. EDUCATION LEVEL AND TRAINING (TO BE GIVEN TO MFI SEPARATELY)

Please indicate the education background of your microfinance staff (yes=1 no=2)

Educational Attainment	Managers	Accountants/ Bookkeepers	Loan Officers	Cashiers	Other Staff
Some High School					
Completed High School					
Vocational					
Some College					
Completed College					
Some Graduate					
Completed Graduate					
Microfinance Training/Experience					

B. MICROFINANCE STAFF TRAINING

(1=Need, 2=Provided Internally, 3=Provided by Outside Source, 4=Not Applicable/No Need)

	Managers	Accountants/ Bookkeepers	Loan Officers	Cashiers	Other Staff
Financial Management					
Personnel Management					
Computers					
Gender					
Accounting (Advanced)					
Delinquency Collections					
Financial Literacy					
Environmental Risk Assessment					
Basic Orientation on the Job					
Basic Management on MFI Operations					
Branch Operation Course					
Internal Control and Audit Course					
Basic Branch Monitoring and MIS					
Basic Accounting and Record Keeping					
Group and Center Management					
Branch Outreach Management					
Credit Management					
Delinquency Management					
Others (SPECIFY) _____					

COMPENSATION AND INCENTIVE SYSTEM (TO BE GIVEN TO MFI SEPARATELY)

Which of the following benefits do you have in your organization? (yes=1 no=2)

	Manager	Accountants/ Bookkeeper	Loan Officer	Cashier	Other Staff
Group I Benefits					
Communication Allowance					
Representation Allowance					
Transportation Allowance					
Meal/Food Allowance					
Rice Allowance					
Clothing Allowance					
Group II Benefits					
SSS Membership					
Leave Credits					
13 th Month Pay					
Private Health Care					
Retirement/Pension Plan					
Life Insurance					
Educational Plan					
Salary Loan					
Housing Loan					
Car/Motorcycle Loan					
Group III Benefits					
Profit-Sharing					
Car Plan					
Housing Plan					
Bonuses other than 13 th month pay					
Trainings/Scholarships					
Others (Specify) _____					