



October 20, 2016

Dear Fellow Rural Bankers:

The Rural Bankers Association of the Philippines (RBAP), through the Rural Bankers' Research and Development Foundation, Inc. (RBRDFI), will conduct a seminar described below as part of its continuing strategy to strengthen the rural banking industry:

Course Title: **Operational Risk Management Training**

Venue: Mindanao Training & Resource Center  
Davao Medical School Foundation, Bajada, Davao City

Schedule: December 2 - 3, 2016 (8:30AM-5:30PM) Friday - Saturday

Participants: President, Risk Management Committee -Director,  
President, Branch Managers, Risk Management Officer,  
Chief Compliance Officer, Head- I.T.Department and Head -  
Human Resource Management

Registration Fee: Six Thousand Pesos Only (₱6,000.00), includes training kits, snack, lunch & certificates only

Deadline: November 20, 2016

Advance registration payments, which can be remitted to the Davao Federation of Rural Bankers, Inc bank account (One Network Bank - San Pedro Branch Current Account Number 040028001872). A scanned copy of the proof of payment (i.e., deposit slip) to gether with the nomination form should be sent immediately to Bing Carmelotes at rac.rbki@yahoo.com.ph for verification. For check payments, check should be payable to Davao Federation of Rural Bankers, Inc.;

For your reservation, please call: Ms. Richelyn A. Carmelotes - 0917-3052693 globe or 0999-9904629 smart or email @ rac.rbki@yahoo.com.ph

Objectives:

- ✓ Define operational risk and its management
- ✓ Determine the duties and responsibilities of Board of Directors, management and Business
- ✓ Line Manager in managing operational risk. Formulate risk appetite statement, risk tolerances and limits
- ✓ Apply Operational Risk Management tools cognizant to Risk Management Process: identify, assess, measure, control and monitor operational risk. Further, it hopes to strengthen the bank's risk management system, which could carry-out at the performance of its activities in safe and sound operations.



Course Outline:

- A. BSP Circular 900 Policy Statement
- B. Scope and extent of Operational Risk and its management
- C. Duties and Responsibilities
  - 1. Board of Directors
  - 2. Management
  - 3. Business Line Managers
  - 4. Operational Risk Management Function
  - 5. Internal Audit
  - 6. Compliance Function
  - 7. Risk Management Unit
- D. Operational Risk Management Framework
  - 1. Risk Identification and Assessment
    - a. Building Loss Event Categories and Loss Database
      - Internal Fraud
      - External Fraud
      - Employment practices and workplace safety
      - Clients, products and business practices
      - Damage to physical assets
      - Business disruption and system failures
      - Execution, delivery and process management
    - b. Introduction to ORM Tools
      - Results of internal/external audit and supervisory issues raised in the BSP Report of Examination (ROE)
      - Internal Loss Data Collection and Analysis
      - Risk Self Assessments (RSA)
      - Risk Control Self Assessments (RCSA)
      - Business Process Mappings
      - Risk and Performance Indicators
      - Scenario Analysis
      - Model Measurement Comparative Analysis
  - 2. Risk Control and Mitigation
  - 3. Risk Monitoring and Reporting
- E. Workshop on RCS
- F. Synthesis

Please be advised that we accept on a first-come-first-served basis with a manageable level up to thirty (30) participants only. This is a live-out seminar.

Thank you.

Sincerely,

**GIOVANI D. GABRIENTO**



**PARTICIPANT'S PROFILE SHEET**

**Operational Risk Management Training**  
**Date: December 2-3, 2016 (Friday- Saturday )**  
**Venue: Davao Medical Foundation, Bajada St., Davao City**

**PRINTED NAME:**

\_\_\_\_\_

*First Name*                      *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
Post Graduate			
College			

**WORK EXPERIENCE: (Last 2 including Current Employment)**

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



**NOMINATION FORM**

<b>Seminar Title:</b>	<b>Operational Risk Management Training</b>	<b>Date:</b>	December 2-3, 2016 (Friday-Saturday)	<b>Time:</b>	8:30 AM to 5:30 PM
<b>Venue:</b>	Davao Medical Foundation, Bajada St., Davao City				

*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