



CENTENARIAN 2025



Department of Public Health and Social Services

155 Hesler Place, Hagåtña, Guam 96910

Division of Senior Citizens

130 University Drive, Suite 8 Castle Mall, Mangilao

Email: Biba.SeniorCitizens@dphss.guam.gov

Tele: (671) 735-7421

Fax: (671) 735-7415



The Department of Public Health and Social Services, Division of Senior Citizens in collaboration with the Senior Citizens Month Central Planning Committee is seeking the public's support and assistance in identifying our island's Centenarians.

ELIGIBILITY

To be recognized as a Centenarian, the Centenarian's primary residence must be Guam and is or will be 100 years of age or older between January 1, 2025 and December 31, 2025. Anyone meeting this guideline is eligible to be bestowed recognition through this event.

WHO CAN FILL THE APPLICATION FORM

The Centenarian or representative of the Centenarian can complete and submit the biographical form.

REQUIRED SUPPORTING DOCUMENT

To verify eligibility, supporting documents are required to confirm the Centenarian's age, name and place of residence. Attach a photocopy of at least **one** of the following documents to the form:

- Birth Certificate
- Passport
- Marriage Certificate
- Other documents showing the Centenarian's date of birth and residence

WHERE TO SUBMIT COMPLETED APPLICATIONS

Submit the following forms to the Division of Senior Citizens, Department of Public Health and Social Services located at 130 University Drive, University Castle Mall, Suite 8 in Mangilao or via email at Biba.SeniorCitizens@dphss.guam.gov:

1. Biographical Form;
2. Consent for Release of Information; and
3. Other supporting documents

DEADLINE

The last day to submit completed Biographical and Consent for Release of Information forms, and other supporting documents is Thursday, February 28, 2025.

For additional information, contact Krisinda C. Aguon, Human Services Program Administrator or Cherika Diego, Administrative Officer at (671) 735-7421 or (671) 735-7415.

BIOGRAPHICAL FORM

INSTRUCTIONS:

Print clearly in black or blue ink. Attach additional sheets of paper as necessary.

SECTION A. CENTENARIAN INFORMATION	
Last Name	
First Name	
Middle Name	
Date of Birth	
Place of Birth	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Village	
Residential Address	
Ethnicity	
Citizenship	
Name of Centenarian's Representative	
Relationship to Centenarian	
Day Time Contact Number	
Alternate Contact Number(s)	

SECTION B.**BACKGROUND INFORMATION**

Full Name of Centenarians Parents	Centenarian's Mother:
	Centenarian's Father:
Name(s) of Spouse(s)	
Date of Marriage	
Years of Marriage	
How many children does Centenarian have?	
Provide names and age of Centenarian's children:	(Oldest to Youngest) 1. 2. 3. 4. 5. 6. 7.
How many grandchildren does Centenarian have?	
How many great-grandchildren does Centenarian have?	
How many great-great grandchildren does Centenarian have?	

How many great-great-great grandchildren does Centenarian have?	
What was Centenarian's highest grade in school?	<p>Elementary (1-8):</p> <p>High School (9-12):</p> <p>College: <i>If Centenarian attended college and has a degree, please indicate type of degree and college attended.</i></p>
What was Centenarian's Professional Career? (Include homemaker.)	
Favorite foods/colors/activities?	
Fun Facts about the Centenarian?	
Hobbies the Centenarian enjoyed or continues to enjoy?	



SECTION C. BRIEF NARRATIVE OF THE CENTENARIAN

If you had the opportunity to showcase and share 3 special characteristics or facts about your Centenarian, what would they be? *(For example: My mom loves to dance and enjoys entertaining others. She joined a dance group when she was 5. She became a dance instructor at the age of 25 and owned a dance studio for 25 years. Although she could no longer have her studio, she continued dancing at events and teaching her friends from the Senior Citizens Center ballroom dancing, cha-cha, and jitterbug. She danced beautifully and elegantly and gleamed ever so brightly whenever she was invited to dance.)*

SECTION D. PHOTOGRAPHS OF THE CENTENARIAN

INSTRUCTIONS: Please provide one to five photographs of the Centenarian (electronic preferred, jpeg format, email to Biba.SeniorCitizens@dphss.guam.gov). Please label each photograph and provide a description of each photo, including names of all individual(s) in the photographs and dates for each. Place photographs in an envelope and attach to this form. If photographs are adhered onto pages of the photo album, do not attempt to remove the photograph; please make arrangements to submit the photo album for review.

Last day to submit Biographical Form is Friday, March 7, 2025

6 of 7



FLIP THE SCRIPT ON AGING: MAY 2025



CENTENARIAN 2025



CONSENT FOR RELEASE OF INFORMATION Senior Citizens Month 2025

I, _____, hereby give the Division of
(Name of Centenarian, Guardian or Family Member)
 Senior Citizens, DPHSS permission to release the personal bio-data information and
 photographs of _____ for the purpose of media
(Full name of Centenarian)
 publication and recognition made through this program and other local, national or
 international programs that promote goodwill for seniors.

 Signature of Centenarian, Guardian,
 or Family Member

 Date

 Witness

 Date

