

Please write all information in print. Indicate None or N.A. if Not Applicable.

CERTIFICATION

In submitting this Application for Employment, I hereby certify that all information herein given are true, complete and correct. I understand that employment in the Company requires absolute honesty. Thus, I acknowledge that any false statement and/or dishonest answer herein stated, or material omission, as hereinafter discovered shall result in disapproval of my application or constitute sufficient cause for my dismissal from employment as the case may be. To fully and completely assess my fitness, I also bind myself to submit to physical and medical examinations, including the government-mandated random drug-testing program, before and during my employment with the Company.

Further, I hereby authorize the Company or its authorized/designated representative to conduct inquiries about my scholastic and employment records and verify all information stated in the application. I understand that whether information may be gathered by the Company relative to the above enumerated aspects and/or areas of my personhood will be vital to the Company in its assessment of my merit and fitness to be part of its workforce, the same being an established Company engaged in an industry impressed with public interest in the country, with known high regard for the integrity, trustworthiness and financial responsibility of its employees, in the event that my given application for officer/staff position prosper into an employer-employee relationship between the Company and the undersigned, my herein signature shall constitute as my continuing authorization to the Company and its designated authorized personnel to conduct a background and credit investigation on myself, as herein described, at any time it may deem necessary during my employment. This I understand has bearing on my merit and fitness to remain an employee of the Company, the same being bound by the Law, the regulatory powers and rules and regulations of pertinent government authorities, such as but not limited to, and as the case may be, the Securities and Exchange Commission, Insurance Commission, and the Bangko Sentral ng Pilipinas, primarily the Manual of Regulations for Banks (MORB), more particularly in the case of Bank Officers, the pertinent subsections of its Sec. X143 on Disqualification of Directors and Officers. Also, in accordance with RA No. 10173 (Data Privacy Act), I hereby consent to the collection, retention, processing, disclosure (as provided under applicable confidentiality and data privacy laws of the Philippines including all subsequent amendments or supplements there(to) of any personal, sensitive personal, and privileged information relating to me, whether provided by me or coming to the Company's possession, and sharing of the said personal, sensitive personal and privileged information to the Company, its offices, branches, subsidiaries and affiliates, accredited third parties/vendors, credit reporting or credit reference agencies, credit protection provider, guarantee institutions, debt collection agencies, private regulatory organizations and other financial institutions, and other outsourced service providers engaged by the Company for the purposes reasonably required by the Company, for the Company's conduct of everyday business, and/or only if required to do so by law or in good faith belief that such action is necessary to: (a) assess my suitability for employment with the Company or any of its subsidiaries; (b) submit reports to Senior Management on recruitment strategies and demographics; (c) submit reports to government agencies; (d) use as reference when conducting reference checks; (e) conduct background/credit investigation; (f) conform to the edicts of the law or comply with legal process served on the Company and its subsidiaries; (g) protect and defend the rights or property of the Company and its subsidiaries and (h) act under exigent circumstances to protect the personal safety of users of the Company and its subsidiaries or the public.

I shall notify the Company in writing, which must be acknowledged by the Company, if I do not consent to the aforementioned processing. I further acknowledge my right to information, access, correction, rectification, erasure of my personal, sensitive personal and privileged information, data portability, objection to processing and to file complaint under the Data Privacy Act. I agree that the Company may retain my personal information for as long as necessary for the fulfillment of the purpose for which it was collected and such other purposes that I may have consented from time to time, as required by pertinent laws and regulations, and provide information when required to do so in accordance with applicable laws, by court order, and jurisprudence.

If I provide the Company with any personal information relating to a third party (e.g. reference information, et.al.), I warrant to the Company that I have obtained the recorded consent of such third party to provide the Company with the third party's personal information for the relevant purposes and can upon the Company's consent request, submit the same for inspection.

I agree that the Company shall not be liable for any loss or damage arising from the Company's disclosure of personal information for the above purposes.

In any event, and while having personal preferences on my future assignment(s), I understand and respect that the Company reserves the right to assign/transfer me to the Head Office or Metro Manila/Provincial Branches, at any time and for any reason it may deem sound for its operations and business.

APPLICANT'S SIGNATURE

DATE

POSITION APPLYING FOR

1st Choice

2nd Choice

3rd Choice

Note: The Bank has the prerogative to process applications for positions other than those cited by the applicant.

Date Available for Employment

Desired Salary

How did you find out about our job vacancies?

☐ Campus Recruitment

☐ Direct Source

☐ Drop Box (specify location)

Headhunter

Jobstreet

Newspaper Ads

Radio / Other Media Ads

☐ Referral of CBCB Employee

☐ Referral of Applicant

Review School

Walk-in / Mail-in

☐ CBS Employee

☐ Website

Others

Name of Referrer:

PHOTO (2x2)

(Taken in the last six (6) months with white background.)

PERSONAL INFORMATION

Last Name

First Name

Middle Name

Nickname

E-mail Address

Mobile No. 1

Mobile No. 2

Permanent Address (No. / Street / District / City / Province / ZIP Code)

Landline No. (Permanent Address)

Present Address (If different from Permanent Address)

Landline No. (Present Address)

Office Address (Floor / Department / Building / No. / Street / District / City / Province / ZIP Code)

Office Landline No.

Gender

☐ Male☐ Female

Age

Date of Birth (mm/dd/yyyy)

Place of Birth

Civil Status

Citizenship

☐ Filipino☐ Naturalized Filipino

Height (In Feet and Inches)

Weight (In Pounds)

Religion

TIN

SSS No.

Pag-IBIG No.

PhilHealth No.

Languages Spoken

Dialects Spoken

(1)

(2)

(3)

(1)

(2)

(3)

FAMILY BACKGROUND

NAME OF FAMILY MEMBER

(Last Name, First Name, Middle Name)

AGE

CIVIL STATUS

OCCUPATION/EDUCATION

NAME OF COMPANY/SCHOOL

Children

Spouse

Father

Mother

Siblings

Eldest

2nd

3rd

4th

5th

EDUCATIONAL BACKGROUND									
	NAME OF SCHOOL		DEGREE/COURSE		YEARS ATTENDED		HONORS		
					FROM	TO			
Grade School									
High School									
College									
Post-Graduate									
PROFESSIONAL QUALIFICATIONS / LICENSES / CERTIFICATIONS			DATE OBTAINED		DATE LAST RENEWED		RATING		
1									
2									
Do you have plans to pursue further studies? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, what course and when?						
SKILLS / QUALIFICATIONS									
Special Skills/Other Qualifications				Hobbies/Recreational Interests					
CAREER									
What type of work are you best qualified for?				What type of work would you like to get into eventually?					
Which location would you prefer to be assigned to? <i>(Note: The Bank reserves the right to assign/transfer any employee to Head Office or Metro Manila/Provincial Branches.)</i>									
<input type="checkbox"/> Head Office (Makati) <input type="checkbox"/> Metro Manila Branch _____ <input type="checkbox"/> Provincial Branch _____									
WORK EXPERIENCE AND REFERENCES									
	PRESENT		PREVIOUS (1)		PREVIOUS (2)		PREVIOUS (3)		
Name of Company									
Industry									
Job Title									
Rank									
Gross Monthly Salary									
Inclusive Dates <i>(mm/dd/yy)</i>	From	To	From	To	From	To	From	To	
Reason for Leaving									
Last Supervising Officer(s)									
Name <i>(Last Name, First Name, Middle Initial)</i>									
Position/Rank									
Contact Number(s)									
Email Address									
OK to Contact?	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		
CHARACTER REFERENCES <i>(do not include relatives)</i>									
Name <i>(Last Name, First Name, Middle Initial)</i>									
Name of Company									
Position/Rank									
Contact Number(s)									
Email Address									
Relation to the Applicant									
OK to Contact?	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		
OTHER INFORMATION									
1. Have you ever been discharged from previous employment? <input type="checkbox"/> Yes <input type="checkbox"/> No				If yes, please state reason:					
2. Have you ever been subjected to any company administrative or legal proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No				If yes, please provide details:					
3. Have you ever been charged, accused, indicted, or tried for violation of any laws, ordinances, rules, or regulations? <input type="checkbox"/> Yes <input type="checkbox"/> No				If yes, please provide details:					
4. Are you suffering or have you suffered from any physical, psychological or any form of ailments? <input type="checkbox"/> Yes <input type="checkbox"/> No				If yes, please describe ailment(s):					
5. Do you have any unpaid bills (e.g., utilities) presently past due? <input type="checkbox"/> Yes <input type="checkbox"/> No				If yes, please provide details:					
6. Do you have any history of past due or cancelled credit cards, or past due loans? <input type="checkbox"/> Yes <input type="checkbox"/> No				If yes, please provide details:					
7. Have you previously applied or been employed with China Banking Corporation or any of its subsidiaries? <input type="checkbox"/> Yes <input type="checkbox"/> No				If yes, where? _____ When? _____ <input type="checkbox"/> China Bank <input type="checkbox"/> China Bank Savings, Inc. <input type="checkbox"/> CBC Subsidiary _____					
8. Do you have any relatives/friends employed with China Bank or any of its subsidiaries? <input type="checkbox"/> Yes <input type="checkbox"/> No				If yes, please identify him/her/them in the spaces provided below:					
Name <i>(Last Name, First Name, Middle Initial)</i>			Relation		Company/Department/Unit/Branch				
PERSON TO NOTIFY IN CASE OF EMERGENCY									
Name <i>(Last Name, First Name, Middle Initial)</i>		Relation		Home Phone No. / Mobile No.		Office No.		Address	