

## DOLE REGIONAL OFFICE \_\_\_\_\_

GOVERNMENT INTERNSHIP PROGRAM (GIP)  
**APPLICATION FORM****INSTRUCTION TO APPLICANTS:**

Please fill-out all the required information in this form and attach additional documents, if necessary.

**1. NAME OF APPLICANT:**

Family Name	First Name	Middle Name
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**2. RESIDENTIAL ADDRESS:**ATTACH 2x2 PHOTO WITH NAME AND  
SIGNATURE TAKEN WITHIN THE LAST THREE  
(3) MONTHS

Telephone No.:

Mobile Number:

E-mail Address:

**3. PLACE OF BIRTH (city/province)****4. DATE OF BIRTH (mm/dd/yyyy)**      /      /**5. GENDER**      ☐ Male      ☐ Female**6. CIVIL STATUS**      ☐ Single      ☐ Married      ☐ Widow/Widower**7. EDUCATIONAL ATTAINMENT**

NAME OF SCHOOL	INCLUSIVE DATES		DEGREE OR DIPLOMA
	From	To	

**CERTIFICATION:** I certify that all information given in this application are complete and accurate to the best of my knowledge. I acknowledge that I have completely read and understood the DOLE-GIP Guidelines as embodied in Department Order No. \_\_\_\_, Series of 2019.

DATE

SIGNATURE OF APPLICANT

**FOR DOLE-RO/FO Use only**

Interviewed and validated by:

NAME and SIGNATURE/Position

DATE

Documents Received:

☐ Transcript of Records☐ Form 137/138☐ Certification from Schools or  
any docs equivalent to☐ Barangay Certification☐ Diploma