



REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF INFORMATION AND
COMMUNICATIONS TECHNOLOGY

APPLICATION FORM

Passport-size Photo

with label
(Surname, Given
Name, Middle
Name)

☐ Retake☐ First Time☒ PROGRAMMING

Instructions: Fill in all the required information, DO NOT leave an item blank. If item is not applicable, Indicate "N/A".
All applications must be filled PERSONALLY by applicant.

PERSONAL INFORMATION				
SURNAME, GIVEN NAME, MIDDLE NAME				TELEPHONE NUMBER
COMPLETE MAILING ADDRESS			EMAIL ADDRESS	
PLACE OF BIRTH	DATE OF BIRTH	GENDER	CITIZENSHIP	Civil Status
COLLEGIATE/TERTIARY EDUCATION (attach certified true copy of transcript of record)				
UNIVERSITY / SCHOOL ATTENDED		DEGREE EARNED		INCLUSIVE YEARS
IT TRAININGS / SEMINARS (related to chosen examination)				
COURSE / SEMINAR		TRAINING CENTER		TOTAL TRAINING HOURS
EMPLOYMENT INFORMATION				
PRESENT OFFICE				TELEPHONE NUMBER
OFFICE ADDRESS				OFFICE CATEGORY <input type="checkbox"/> Gov't <input type="checkbox"/> Private
DESIGNATION / POSITION			NO. OF YEARS IN PRESENT POSITION	
For Programming: Check the language that will use in the exam				
<input type="checkbox"/> VISUAL BASIC 6.0 <input type="checkbox"/> C++ <input type="checkbox"/> C LANGUAGE <input type="checkbox"/> VB NET <input type="checkbox"/> C# <input type="checkbox"/> JAVA				
Additional Information (Check all that apply)				
<input type="checkbox"/> PWD <input type="checkbox"/> Senior Citizen <input type="checkbox"/> Solo Parent <input type="checkbox"/> Member of an IP Group				
<p>IMPORTANT: Per Section 2 (Declaration of Policy) of the Data Privacy Act of 2012, it is the policy of the State to protect the fundamental human right of privacy, of communication while ensuring free flow of information to promote innovation and growth. The State recognizes the vital role of information and communications technology in nation building and its inherent obligation to ensure that personal information in information and communications systems in the government and in the private sector are secured and protect. As such, information collected from this form shall be held in strict confidence and shall only be used solely for records keeping purposes. I hereby certify to the best of my knowledge and information, that these are true and correct. Any information found to be false is a ground for disqualification from taking the Proficiency Examination in the future.</p> <p>***NON-APPEARANCE ON THE EXAM DATE, NO REFUND POLICY***</p>				
SIGNATURE OF APPLICANT				DATE ACCOMPLISHED