MITSUKOSHI MOTORS PHILS., INC.				
POLICY AND PROCEDURES				
POLICY TITLE :	COMPANY IDENTIFICATION CARD	Ref. No.		
DEPARTMENT :	HUMAN RESOURCE DEPARTMENT	HRD 16-01-031		
то :	BRANCH MANAGER, CASHIER, ASST. CASHIER, CREDIT SUPERVISOR, ACCOUNT COUNSELOR, MARKETING ASSISTANT, BRANCH MECHANIC	JANUARY 05,2016		

OBJECTIVE:

- 1. To provide and strengthen guidelines on wearing of Company Identification (ID) Card.
- 2. To facilitate process of replacement of ID in the event of loss or damage.
- 3. To improve customer experience by providing easy identification of service providers in the branch.

POLICIES:

- 1. Identification Card must be properly worn by all employees on all working days including Sundays, Holidays (legal/special holidays), and Scheduled Trainings/Official Business Event.
- 2. Branch Managers shall be directly responsible in ensuring strict monitoring and proper wearing of Company Identification Card
- 3. Any misrepresentation/misuse that will be incurred in the event of loss of ID shall be the full responsibility of the concerned employee and can be charged to the employee.
- 4. In case of suspension and termination, employee is required to immediately surrender his/her company ID to his/her Branch Manager.
- 5. In case of Resignation, ID should be returned a day before effective date of resignation
- 6. Disciplinary Actions: Non compliance of this policy shall be dealt with the following Disciplinary Actions based on COD: Rule 5, Section 2- Specific Company Regulations & Standards Class 1

FIRST OFFENSE : Verbal Warning (With Voluntary Commitment Letter)

SECOND OFFENSE: Written Warning

THIRD OFFENSE : Final Written Warning-with conference with Area Manager

FOURTH OFFENSE: 7 Davs Suspension

FIFTH OFFENSE : Permanent Written Warning/ Termination

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PROCEDURES:

1. Damaged Identification Card

- 1.1 Employee
 - 1.1.1 Fill out Identification Card Request Form duly noted by Branch Manager.
 - 1.1.2 Submit the following to HRD at employee.id@mitsukoshimotors.com.
 - 1.1.2.1 Identification Card Request Form (duly noted by BM)
 - 1.1.2.2 Scanned copy of damaged ID
 - 1.1.2.3 Soft copy of recent 1x1 ID Picture (red background).
 - 1.1.3 Return old ID to HRD upon receipt of the New ID.
- 1.2 Branch Manager
 - 1.2.1 Review ID Card Request.
 - 1.2.2 Affix signature to confirm approval of request.

2. Lost Identification Card

- 2.1 Employee
 - 2.1.1 Secure Affidavit of Loss.
 - 2.1.2 Fill out Identification Card Request Form duly noted by Branch Manager
 - 2.1.3 A Fifty Pesos (P50.00) Service Charge shall be paid by the employee in case of loss of ID
 - 2.1.4 Submit the following to HRD at employee.id@mitsukoshimotors.com.
 - 2.1.4.1 Identification Card Request Form (duly noted by BM)
 - 2.1.4.2 Scanned copy of damaged ID
 - 2.1.4.3 Soft copy of recent 1x1 ID Picture (red background).
- 2.2 Branch Manager
 - 2.2.1 Review ID Card Request.
 - 2.2.2 Affix signature to confirm approval of request

3. Updating of Information

- 3.1 Change of Surname
 - 3.1.1 Employee
 - 3.1.1.1 Fill out Identification Card Request Form duly noted by Branch Manager
 - 3.1.1.2 Ensure that all SSS, PhilHealth, Pag Ibig, TIN information are duly updated before updating the ID.
 - 3.1.1.3 Submit the following to HRD at employee.id@mitsukoshimotors.com.
 - 3.1.1.4 Identification Card Request Form (duly noted by BM)
 - 3.1.1.5 Soft copy of recent 1x1 ID Picture (red background).
 - 3.1.1.6 Return old ID to HRD upon receipt of the New ID.
- 3.2 Change of Position
 - 3.2.1 Replacement of ID will be provided by HRD upon updating of employee's position.

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4. Form Explanation
Strictly observe proper filling out of the Identification Card Request Form

<u>PARTICULAR</u>	EXPLANATION
4.1 Type of Request	: Check specific type of request
	(Replacement of Damaged ID, Lost ID,
	Update Information)
4.2 Name	: Requesting employees full name
	(Last Name, First Name, Middle Name
4.3 Company/Branch	: Indicate current company and branch
4.4 Position	: Employee's current position.
4.5 Date Requested	: Actual Date of Request
4.6 Date Hired	: Actual Date Hired as Trainee
4.7 Employment Status	: Indicate current employment status
4.8 Address	: Indicate current address
4.9 Contact Number	: indicate current Contact Number (mobile
4.40 D' (I. I.	number / landline number)
4.10 Birthday	: Employees Birthday (MM-DD-YYYY)
4.11 SSS Number	: Indicate SSS Number
4.12 TIN Number	: Indicate TIN Number
4.13 Pag Ibig Number	: Indicate Pag Ibig Number
4.14 Philhealth Number	: Indicate Philhealth Number
4.15 Contact Person In Case of Emergency 4.16 Relation	: Employee's Immediate Family
4.17 Contact Number	: Relationship to employee: Employee's Immediate Family's Contact
4.17 Contact Number	Number
4.18 Requested by	:Employee's Signature over Printed Name
4.19 Noted by	:BM Signature over Printed Name
4.19 Noted by	Divi Digitature over i filiteu Ivallie

TYPE OF REQUEST:	() REPLACEMENT OF DAMAGED	() LOST ID	() UPDATE INFORMATION
PERSONAL INFORM	MATION		
NAME:		DATE REQI	UESTED
COMPANY/BRANCH		DATE HIRE	D:
POSITION:		EMPLOYEN	MENT STATUS:
ADDRESS			
CONTACT NUMBER		BIRTHDAY	
SSS NUMBER		PAG IBIG N	UMBER
ΓΙΝ NUMBER		PHILHEALT	H NUMBER
CONTACT PERSON IN CASE OF EMERGENCY:			·
RELATION:		CONTACT	NUMBER:
REQUESTED BY:			·
IOTED BY:			

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