



# GAP SECURITY AGENCY CORPORATION

Head Office: 3760 Noah Street, Countryside Village, San Rafael II, Noveleta Cavite 4105  
Satellite Office: #06 Santiago Homes, SAV I, Sucat, Parañaque City  
E-Mail: RBP\_GAPSecAg@yahoo.com.ph    Mobile: (917) 805-2602  
E-Mail: Ting\_M2000@yahoo.com    Mobile: (919) 898-3857  
Telephone: (46) 438-6890 / (46) 438-6864

## APPLICATION FORM

|   |              |               |
|---|--------------|---------------|
| <b>PERSONAL DATA:</b>                                   |              |               |
| Name:   |              |               |
| (Last Name)   | (First Name) | (Middle Name) |
| Address & Contact Number:                               |              |               |
|   |              |               |
| Date of Birth:  | Height:      | Civil Status: |
| Place of Birth:   | Weight:      | Religion:     |
| Citizenship:  | Sex:         |               |
| Spouse's Name:  |              | Occupation:   |
| His/Her Address & Contact#:                             |              |               |
|   |              |               |
| Number of children with their name/s and date of birth: |              |               |
| 1.  | 5.           |               |
| 2.  | 6.           |               |
| 3.  | 7.           |               |
| 4.  | 8.           |               |
| Father's Name:  |              | Occupation:   |
| Mother's Name:  |              | Occupation:   |
| Parent's Address & Contact #:                           |              |               |
|   |              |               |
| Person to be contacted incase of emergency:             |              |               |
| Address & Contact #:                                    |              |               |
|   |              |               |

|                                |                |
|--------------------------------|----------------|
| <b>EDUCATIONAL BACKGROUND:</b> |                |
|                                |                |
|                                | Name of School |
|                                | Year Graduated |
| Elementary:                    |                |
| High School:                   |                |
| College:                       |                |
| Course:                        |                |
| Vocational:                    |                |
| Course:                        |                |
| Special Skills:                |                |

|                           |    |          |         |  |
|---------------------------|----|----------|---------|--|
| <b>EMPLOYMENT RECORD:</b> |    |          |         |  |
| From                      | To | Position | Company |  |
|                           |    |          |         |  |
|                           |    |          |         |  |
|                           |    |          |         |  |

|                              |            |         |
|------------------------------|------------|---------|
| <b>CHARACTER REFERENCES:</b> |            |         |
| Name                         | Occupation | Address |
|                              |            |         |
|                              |            |         |
|                              |            |         |
|                              |            |         |

|                |       |
|----------------|-------|
| Res. Cert. No: | _____ |
| Issued At:     | _____ |
| Issued On:     | _____ |
| Passport No:   | _____ |
| Issued At:     | _____ |
| Issued On:     | _____ |

|                  |       |
|------------------|-------|
| SSS No:          | _____ |
| Phil. Health No: | _____ |
| TIN No:          | _____ |
| Pag-ibig No:     | _____ |
| NBI ID No.       | _____ |
| SBR Date Issued: | _____ |

\_\_\_\_\_  
Applicant's Signature

1. Have you been issued with violation by PNP SOSIA? (Yes / No) \_\_\_\_\_ if yes, please state the violation \_\_\_\_\_ .
2. Are you willing to be assigned anywhere and be rotated as the agency may desire? (Yes / No) \_\_\_\_\_ if no, please explain why?  
\_\_\_\_\_ .
3. Are you willing to adhere strictly to all the policies set forth by this agency? (Yes / No) \_\_\_\_\_ .
4. Do you have any insurance? (Yes / No) \_\_\_\_\_ if yes, please state the name of the insurance company?  
\_\_\_\_\_ .

I HEREBY CERTIFY that the answers given above are true and correct to the best of my knowledge and behalf. Any erroneous entry on this information sheet is enough to disqualify my application.

I FURTHER CERTIFY that I am willing to be deducted FIFTY PESOS (PhP 50.00) or more every month representing as my CASH BOND to the Agency and can be withdrawn only upon resignation from **GAP SECURITY AGENCY CORPORATION**. And when I am fully cleared of any money and/or property accountabilities, it is clearly understood that in case of losses or damage to the properties/assets and/or business interest of the Agency and/or its clients that I am assigned as guard, due to my negligence my deposit will be used as payment either full or partial.

Noveleta, Cavite, Philippines

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

**SKETCH OF PRESENT ADDRESS:**