

## APPLICATION FORM

Passport size photo
with label (Surname Given Name, Middle Name)

<b>/</b>	PROGRAMMING
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Retake

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.

DEDCONAL INFORMATION									
PERSONAL INFORMATION									
SURNAME, GIVEN NAME, MIDDLE NAME MARQUEZ, EIJIEN FAJARDO					MOBILE NUMBER (e.g. 9XXXXXXXXX). <b>9677509130</b>				
COMPLETE MAILING ADDRESS (Street no., Brgy., Municipality / City, Province) ZONE 4, STO. ROSARIO STO.DOMINGO NUEVA ECIJA					E-MAIL ADDRESS eijien12@gmail.com				
PLACE OF BIRTH  Cabanatuan City	DATE OF BIRTH (mm/d- 07/12/2002	d/yyyy)	GENDER Male		CITIZENSHIP FILIPINO		CIVIL STATUS SINGLE		
COLLEGIATE / TERTIARY ED	OUCATION (attach o	certified tru	ie copy o	f transcr	ipt of reco	rds)			
UNIVERSITY / SCHOOL ATTENDED		DEGREE EARNED			INCLUSIVE YEARS Ex. 2019-present				
NUEVA ECIJA UNIVERSITY OF SCIEN	N/A				2020 - Present				
N/A	N/A				N/A				
N/A	N/A				N/A				
IT TRAININGS / SEMINARS (related to chosen examination)									
COURSE / SEMINAR TITLE	TRAI	TRAINING CENTER			TOTAL TRAINING HOURS				
N/A	N/A				0.0				
N/A	N/A				0.0				
EMPLOYMENT INFORMATIO	N								
PRESENT OFFICE (DO NOT ABBREVIATE THE NAME) <b>N/A</b>					TELEPHONE NUMBER/CONTACT NO.				
OFFICE ADDRESS N/A	OFI [			OFFICE CATEGORY  Gov't  Private					
DESIGNATION / POSITION NO. OF YEARS IN PRESENT POSITION									
N/A									
For Programming: Check the language that VISUAL BASIC 6.0 VISUAL BASIC.NET	tt you will use in the exam.  C  C++	C# JAVA							
ADDITIONAL INFORMATION: (Check all that app	oly) PWD .	Senior Citizen	Sol	o Parent	Member	of an IP Gro	oup		
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.  ***NON-APPEARANCE ON THE EXAM DATE, NO REFUND POLICY***									
SIGNATURE OF APPLICANT	DATE ACCOMPLISHED 03/01/2024								