

INSTRUCTIONS: Please fill out the form legibly in block letters using a ballpoint pen. Check appropriate boxes. Please do not leave any items unanswered. Indicate "NA" if not applicable. You may use extra sheet if needed. Submit Accomplished form to the Public Employment Service Office (PESO) Manager or Officer in your city/municipality.

I. PERSONAL INFORMATION

432	432	432	324
Surname	First Name	Middle Name	Suffix (Ex: Sr., Jr., III, etc.)
DATE OF BIRTH (mm/dd/yyyy) 432			
SEX <input checked="" type="radio"/> Male <input type="radio"/> Female	PRESENT ADDRESS		
RELIGION ewq	House No./ Street Village	432	
	Barangay	432	
	City/Municipality	432	
CIVIL STATUS <input checked="" type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Widow	Province	432	
TIN 432			HEIGHT (FT.) 4324
DISABILITY <input type="checkbox"/> Visual <input type="checkbox"/> Speech <input type="checkbox"/> Mental <input type="checkbox"/> Hearing <input checked="" type="checkbox"/> Physical <input type="checkbox"/> Others			CONTACT NUMBER/S 432
			EMAIL 432

EMPLOYMENT STATUS / TYPE

<input type="checkbox"/> Employment <input type="checkbox"/> Wage Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Fisherman/Fisherfolk <input type="checkbox"/> Vendor/Retailer <input type="checkbox"/> Home-based Worker <input type="checkbox"/> Transport <input type="checkbox"/> Domestic Worker <input type="checkbox"/> Freelancer <input type="checkbox"/> Artisan/Craft Worker <input type="checkbox"/> Others (Please specify): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<input type="checkbox"/> Unemployed <input type="checkbox"/> New Entrant/Fresh Graduate <input type="checkbox"/> Terminated/Laid off (local) <input type="checkbox"/> Finished Contract <input type="checkbox"/> Terminated/Laid off (abroad) <input type="checkbox"/> Retired <input type="checkbox"/> Resigned <input type="checkbox"/> Specify Country: <input type="checkbox"/> Terminated/Laid off due to calamity <div style="border: 1px solid black; height: 40px; width: 100%;"></div> <input type="checkbox"/> Others, please specify: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Are you an OFW? <input type="radio"/> Yes <input checked="" type="radio"/> No	Are you a former OFW? <input type="radio"/> Yes <input checked="" type="radio"/> No
Specify country:	Latest country of deployment: <div style="border: 1px solid black; height: 40px; width: 100%;"></div> Month and year of return to Philippines: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Are you a 4Ps beneficiary? Yes No Household ID No:

II. JOB PREFERENCE

PREFERRED OCCUPATION	PREFERRED WORK LOCATION	
<input type="radio"/> Part-time <input type="radio"/> Full-time	<input type="radio"/> Local (specify cities/municipalities):	<input type="radio"/> Overseas, (specify countries):

1.	1.	Country 1
2.	2.	Country 2
3.	3.	Country 3

III. LANGUAGE / DIALECT PROFICIENCY (check if applicable)

LANGUAGE/DIALECT	Read	Write	Speak	Understand
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Filipino	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mandarin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Others:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IV. EDUCATIONAL BACKGROUND

Currently in school? Yes No

Level:	COURSE:	Year Graduated	IF UNDERGRADUATE	
			LEVEL REACHED	YEAR LAST ATTENDED
Elementary				
<input checked="" type="radio"/> Secondary (Non-K12)	<input type="radio"/> Secondary (K-12)	Strand:		
Tertiary				
Graduate Studies/ Post-graduate				

V. TECHNICAL/VOCATIONAL AND OTHER TRAINING (Include courses taken as part of college education)

TRAINING/VOCATIONAL COURSE	HOURS OF TRAINING	TRAINING INSTITUTION	SKILLS ACQUIRED	CERTIFICATES RECEIVED (NC I, NC II, NC III, NC IV, etc.)
1.				
2.				
3.				

VI. ELIGIBILITY/ PROFESSIONAL LICENSE

ELIGIBILITY (Civil Service)	DATE TAKEN	PROFESSIONAL LICENSE (PRC)	VALID UNTIL
1.			
2.			

VII. WORK EXPERIENCE (Limit to 10 year period, start with the most recent employment)

COMPANY NAME	ADDRESS (City/Municipality)	POSITION	NUMBER OF MONTHS	STATUS (Permanent, Contractual, Parttime, Probationary)
1.				
2.				
3.				

VIII. OTHER SKILLS ACQUIRED WITHOUT CERTIFICATE

- AUTO MECHANIC
- ELECTRICIAN
- PHOTOGRAPHY
- BEAUTICIAN
- EMBROIDERY
- PLUMBING
- CARPENTRY WORK
- GARDENING
- SEWING DRESSES
- COMPUTER LITERATE
- MASONRY
- STENOGRAPHY
- DOMESTIC CHORES
- PAINTER/ARTIST
- TAILORING
- DRIVER
- PAINTING JOBS
- OTHERS: