

**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**

capatian	roi	cunanan	
Surname	First Name	Middle Name	Suffix (Ex: Sr., Jr., III, etc.)
DATE OF BIRTH (mm/dd/yyyy)	02/18/2002		
SEX <input checked="" type="radio"/> Male <input type="radio"/> Female	PRESENT ADDRESS		
RELIGION catholic	House No./ Street Village	058 purok 1	
CIVIL STATUS <input checked="" type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Widow	Barangay	san roque	
	City/Municipality	san luis	
	Province	pampanga	
TIN	214354264267		HEIGHT (FT.) 5'6
DISABILITY <input type="checkbox"/> Visual <input type="checkbox"/> Speech <input type="checkbox"/> Mental <input type="checkbox"/> Hearing <input type="checkbox"/> Physical <input type="checkbox"/> Others			CONTACT NUMBER/S 09634238213
			EMAIL roialexiscunananancapatian@gmail.com

**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 checked="" type="checkbox"/> Unemployed <input checked="" 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>
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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: 20px; 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? <input type="radio"/> Yes <input checked="" type="radio"/> No Household ID No:	MM/YYYY

## II. JOB PREFERENCE

PREFERRED OCCUPATION	PREFERRED WORK LOCATION		
<input type="radio"/> Part-time <input checked="" type="radio"/> Full-time	<input checked="" type="radio"/> Local (specify cities/municipalities): bustos 2. 3.		<input type="radio"/> Overseas, (specify countries): Country 1 Country 2 Country 3
artist			
it professional			
3.			

## III. LANGUAGE / DIALECT PROFICIENCY (check if applicable)

LANGUAGE/DIALECT	Read	Write	Speak	Understand
English	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Filipino	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" 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		2015		
<input type="radio"/> Secondary (Non-K12)	<input checked="" type="radio"/> Secondary (K-12)	Strand: GAS	2021	
Tertiary	BSIT	2024		
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

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> AUTO MECHANIC                | <input type="checkbox"/> ELECTRICIAN               | <input type="checkbox"/> PHOTOGRAPHY    |
| <input type="checkbox"/> BEAUTICIAN                   | <input type="checkbox"/> EMBROIDERY                | <input type="checkbox"/> PLUMBING       |
| <input type="checkbox"/> CARPENTRY WORK               | <input type="checkbox"/> GARDENING                 | <input type="checkbox"/> SEWING DRESSES |
| <input checked="" type="checkbox"/> COMPUTER LITERATE | <input type="checkbox"/> MASONRY                   | <input type="checkbox"/> STENOGRAPHY    |
| <input type="checkbox"/> DOMESTIC CHORES              | <input checked="" type="checkbox"/> PAINTER/ARTIST | <input type="checkbox"/> TAILORING      |
| <input type="checkbox"/> DRIVER                       | <input checked="" type="checkbox"/> PAINTING JOBS  | OTHERS:                                 |