

NSRP Form 1 September 2020		Republic of the Philippines Department of Labor and Employment <b>NATIONAL SKILLS REGISTRATION PROGRAM</b> <b>JOBSEEKER REGISTRATION FORM</b>		
<b>INSTRUCTIONS:</b> 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				
Delos Santos		wad	adwwd	a
Surname		First Name	Middle Name	Suffix (Ex: Sr., Jr., III, etc.)
DATE OF BIRTH (mm/dd/yyyy)		dwadw		
SEX <input type="radio"/> Male <input checked="" type="radio"/> Female		PRESENT ADDRESS		
RELIGION dwad		House No./ Street Village	a	
CIVIL STATUS <input checked="" type="radio"/> Single		Barangay	adw	
<input type="radio"/> Married		City/Municipality	adw	
<input type="radio"/> Widow		Province	adwa	
TIN			HEIGHT (FT.) dwadwa	
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 dwad	
			EMAIL w	
EMPLOYMENT STATUS / TYPE				
<input type="checkbox"/> Employment		<input type="checkbox"/> Unemployed		
Are you an OFW? <input type="radio"/> Yes <input type="radio"/> No		Are you a former OFW? <input type="radio"/> Yes <input type="radio"/> No		
Are you a 4Ps beneficiary? <input type="radio"/> Yes <input type="radio"/> 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? <input type="radio"/> Yes <input type="radio"/> No					
Level:	COURSE:		Year Graduated	IF UNDERGRADUATE	
				LEVEL REACHED	YEAR LAST ATTENDED
Elementary					
<input 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 II, 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					
<div><div><input type="checkbox"/> AUTO MECHANIC</div><div><input type="checkbox"/> BEAUTICIAN</div><div><input type="checkbox"/> CARPENTRY WORK</div><div><input type="checkbox"/> COMPUTER LITERATE</div><div><input type="checkbox"/> DOMESTIC CHORES</div><div><input type="checkbox"/> DRIVER</div></div> <div><div><input type="checkbox"/> ELECTRICIAN</div><div><input type="checkbox"/> EMBROIDERY</div><div><input type="checkbox"/> GARDENING</div><div><input type="checkbox"/> MASONRY</div><div><input type="checkbox"/> PAINTER/ARTIST</div><div><input type="checkbox"/> PAINTING JOBS</div></div> <div><div><input type="checkbox"/> PHOTOGRAPHY</div><div><input type="checkbox"/> PLUMBING</div><div><input type="checkbox"/> SEWING DRESSES</div><div><input type="checkbox"/> STENOGRAPHY</div><div><input type="checkbox"/> TAILORING</div><div>OTHERS:</div></div>					