

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

I. PERSONAL INFORMATION

dwad	wadwa	dwad	
Surname	First Name	Middle Name	Suffix (Ex:
DATE OF BIRTH (mm/dd/yyyy) wadwa			
SEX <input checked="" type="radio"/> Male <input type="radio"/> Female	PRESENT ADDRESS		
RELIGION adw	House No./ Street Village	dwad	
	Barangay	dwad	
	City/Municipality	wad	
Province	wa		
TIN			HEIGHT (FT.)
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 E- dwa MAIL

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 checked="" type="radio"/> Part-time <input type="radio"/> Full-time	<input checked="" type="radio"/> Local (specify cities/municipalities): 1. 2. 3.	<input type="radio"/> Overseas, (specify) Country 1 Country 2 Country 3

III. LANGUAGE / DIALECT PROFICIENCY (check if applicable)

LANGUAGE/DIALECT	Read	Write	Speak
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Filipino	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Mandarin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Others:	<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 checked="" 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
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
- DRIV/FR PAINTING JOBS OTHERS

— DRIVERS

— VEHICLES & EQUIPMENT

— OTHERS.