

Republic of the Philippines
Department of Labor and Employment
NATIONAL SKILLS REGISTRATION PROGRAM
JOBSEEKER REGISTRATION FORM

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

I. PERSONAL INFORMATION

321	3213	13212	32
Surname	First Name	Middle Name	Suffix (Ex: Sr)
DATE OF BIRTH (mm/dd/yyyy)	321		
SEX <input checked="" type="radio"/> Male <input type="radio"/> Female	PRESENT ADDRESS		
RELIGION	House No./ Street Village	213	
321	Barangay	3213	
CIVIL STATUS <input checked="" type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Widow	City/Municipality	213	
	Province	21	
TIN			HEIGHT (FT.) 32'
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 3 E-MAIL 31231

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 <input type="radio"/> Part-time <input type="radio"/> Full-time	PREFERRED WORK LOCATION	
	<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 (check all that apply)

LANGUAGE/DIALECT	Read	Write	Speak	Un
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 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
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 type="checkbox"/> COMPUTER LITERATE	<input type="checkbox"/> MASONRY	<input type="checkbox"/> STENOGRAPHY

☐ DOMESTIC CHORES

☐ PAINTER/ARTIST

☐ TAILORING

☐ DRIVER

☐ PAINTING JOBS

OTHERS: