

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

| | | | |
|--|---------------------------|-------------|----------------------------------|
| ewq | ewq | ewq | ewq |
| Surname | First Name | Middle Name | Suffix (Ex: Sr., Jr., III, etc.) |
| DATE OF BIRTH (mm/dd/yyyy) | ewq | | |
| SEX <input checked="" type="radio"/> Male <input type="radio"/> Female | PRESENT ADDRESS | | |
| RELIGION ewq | House No./ Street Village | ewq | |
| | Barangay | ewq | |
| | City/Municipality | ewq | |
| CIVIL STATUS <input checked="" type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Widow | Province | ewq | |

| | |
|---|-------------------------|
| TIN | HEIGHT (FT.) ewq |
| 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 ewq |
| | EMAIL ewq |

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: 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? Yes No Household ID 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): | <input checked="" 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 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 | 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 type="checkbox"/> COMPUTER LITERATE | <input type="checkbox"/> MASONRY | <input type="checkbox"/> STENOGRAPHY |
| <input type="checkbox"/> DOMESTIC CHORES | <input type="checkbox"/> PAINTER/ARTIST | <input type="checkbox"/> TAILORING |
| <input type="checkbox"/> DRIVER | <input type="checkbox"/> PAINTING JOBS | OTHERS: |