

For Job Order Workers

Print legibly. Mark appropriate boxes ☐ with " ☒ " and use separate sheet if necessary.

[illegible]

IV. CIVIL SERVICE ELIGIBILITY						
29.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE/ TESDA/NCC	RATING	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	DATE OF RELEASE
(Continue on separate sheet if necessary)						
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VI. SPECIAL SKILLS

31. SPECIAL SKILLS (i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)	Proficiency		
	Highly Skilled	Average	Fair

(Continue on separate sheet if necessary)

VII. TRAINING PROGRAMS (Start from the most recent training.)

32. TITLE OF SEMINAR/CONFERENCE/WORKSHOP/SHORT COURSES (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	CONDUCTED/ SPONSORED BY (Write in full)
	From	To		
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(Continue on separate sheet if necessary)

36. Are you related by consanguinity or affinity to any of the following : a. Within the third degree with the appointing authority, recommending authority, chief of office/bureau/department or person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
	If YES, give details:	

(Continue on separate sheet if necessary)

VI. SPECIAL SKILLS							
22.	SPECIAL SKILLS (i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)	Proficiency (Please check)			REMARKS		
		Highly Skilled	Average	Fair			
VII. TRAINING PROGRAMS (Start from the most recent training.)							
23.	TITLE OF SEMINAR/CONFERENCE/WORKSHOP/SHORT COURSES (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	CONDUCTED/ SPONSORED BY (Write in full)		
		From	To				
		/ /	/ /				
		/ /	/ /				
24.	Are you related by consanguinity or affinity to any of the following : a. Within the third degree with the appointing authority, recommending authority, chief of office/bureau/ department or person who has immediate supervision over you in the Office,Department/Project where you will be appointed?	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____ _____ _____					
25. REFERENCES (Person not related by consanguinity or affinity to applicant / appointee)							
NAME		ADDRESS		TEL. NO.			
26. I declare under oath that this Personal Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I also authorize the agency head / authorized representative to verify / validate the contents stated herein. I trust that this information shall remain confidential.				<div style="border: 1px solid black; padding: 10px; text-align: center;"> PLEASE PASTE an ID picture taken within the last 6 months (1"x1" or 2" x 2" or Passport Size) (REQUIRED) </div> <div style="text-align: center; margin-top: 10px;">PHOTO</div>			
<div style="border: 1px solid black; padding: 2px;">COMMUNITY TAX CERTIFICATE NO.</div>		<div style="border: 1px solid black; height: 100px; margin-top: 20px;"> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> </div>		<div style="border: 1px solid black; height: 100px; margin-top: 20px;"> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> </div>			
<div style="border: 1px solid black; padding: 2px;">ISSUED AT</div>						<div style="border: 1px solid black; padding: 2px;">SIGNATURE (Sign inside the box)</div>	
<div style="border: 1px solid black; padding: 2px;">/ /</div> <div style="border: 1px solid black; padding: 2px;">ISSUED ON (mm/dd/yyyy)</div>						<div style="border: 1px solid black; padding: 2px;">DATE ACCOMPLISHED</div>	
Page 2 of 2							