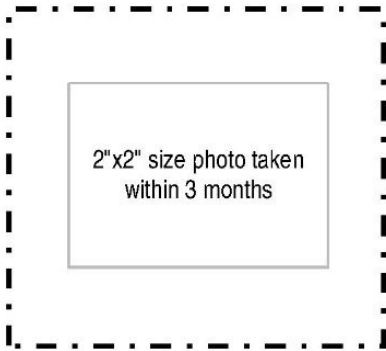




Republic of the Philippines
PHILIPPINE NATIONAL POLICE
 DIRECTORATE FOR PERSONNEL AND RECORDS MANAGEMENT
RECRUITMENT AND SELECTION DIVISION
 Camp Crame, Quezon City



PO1 RECRUITMENT APPLICATION FORM



PLEASE CHECK UNIT WHERE YOU ARE APPLYING:

- SAF
- MG
- PRO 1
- PRO 2
- PRO 3
- PRO 4A
- PRO 4B

RECRUITING UNIT / OFFICE

- PRO 5
- PRO 6
- PRO 7
- PRO 8
- PRO 9
- PRO 10
- PRO 11
- PRO 12
- PRO 13
- PRO ARMM
- PRO COR
- NCRPO

WARNING: This application must be filled out personally by the applicant. Any false information or misrepresentation made in this information sheet is a ground for disqualification and filing of criminal action against the applicant.

PART I - PERSONAL INFORMATION				
LAST NAME	FIRST NAME	QLFR	MIDDLE NAME	
PERMANENT MAILING ADDRESS (House No., Street, Town Province/City)				ZIP CODE
GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female		CONTACT NUMBERS (Landline & Mobile)		E-MAIL ADDRESS
CIVIL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> WIDOW/ER <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED		DATE OF BIRTH (mm/dd/yyyy)	AGE	PLACE OF BIRTH (City, Town Province)
WEIGHT (in kgs)	HEIGHT (in meters)	Member of NCIP/With NAPOLCOM Height/Age Waiver ONLY Tribe/ Date Granted: _____		
ANY GOVERNMENT ELIGIBILITY				
<input type="checkbox"/> RA 1080 <input type="checkbox"/> RA 6506 <input type="checkbox"/> PD 907 <input type="checkbox"/> CSC PROFESSIONAL <input type="checkbox"/> CSC PO1 <input type="checkbox"/> NAPOLCOM Others (Specify): _____				
Have you ever been charged of any Administrative/Criminal Case in any Court or Investigative Body? <input type="checkbox"/> NO <input type="checkbox"/> YES If YES, please give the details: Kind of Offense, Date of Filing, Court/Investigative Body with Jurisdiction and Status of the Case. Please attached here a copy of the decision and details ----->				
Haver you ever applied for any position in the PNP? <input type="checkbox"/> NO <input type="checkbox"/> YES If YES, what vacancy? <input type="checkbox"/> PO1 <input type="checkbox"/> LATERAL ENTRY <input type="checkbox"/> NUP DENIED? ____ How many times? ____ Reason for DENIAL: _____				
PART II - EDUCATIONAL INFORMATION				
DEGREE	COURSE COMPLETED	DATE GRADUATED (MM/DD/YYYY)	NAME OF SCHOOL	LOCATION
PRIMARY				
SECONDARY				
BACHELOR'S DEGREE				
GRADUATE DEGREE				
PART III - PREVIOUS EMPLOYMENTS				
NAME OF COMPANY / EMPLOYER	ADDRESS	YEAR EMPLOYED	CONTACT NUMBER	REASON FOR SEPARATION
PART IV - CHARACTER REFERENCE				
NAME	ADDRESS	CONTACT NUMBER		

I HEREBY CERTIFY that the information and/or statements in this application are all true and correct, and I am fully aware that any false information or statement provided by me in this application shall render me liable for criminal prosecution.

Signature Over Printed Name of Applicant

Date Accomplished

General Weighted Average (GWA): _____

Eligibility Rating (PRC, CSC, NAPOLCOM): _____

Religion: _____