

Republic of the Philippines  
DEPARTMENT OF EDUCATION  
Davao City Division

Application No.	_____
Date of Exam	_____
Place of Exam	_____

**1. APPLICANT'S NAME (Print in CAPITAL Letters)**

\_\_\_\_\_ (Last Name) \_\_\_\_\_ (First Name) \_\_\_\_\_ (Middle Name) \_\_\_\_\_ (M.I.) \_\_\_\_\_ (Name Extension.) **2. AGE:** \_\_\_\_\_

**3. APPLICANT'S MAIDEN NAME:**

\_\_\_\_\_ (Last Name) \_\_\_\_\_ (First Name) \_\_\_\_\_ (First Name) \_\_\_\_\_ (First Name)

**4. COMPLETE MAILING ADDRESS**

**ZIP CODE**

**Tel. No.:** \_\_\_\_\_

**Cell. No.:** \_\_\_\_\_

**5. CIVIL STATUS:** \_\_\_\_\_ **6. SEX:** Male  Female  **7. HEIGHT (m)** \_\_\_\_\_ **8. WEIGHT** \_\_\_\_\_

**9. BIRTHDATE:**    **10. BIRTHPLACE:** \_\_\_\_\_ **11. CITIZENSHIP:** \_\_\_\_\_  
mm mm yyyy (City/Town/Province)

**12. EDUCATIONAL ATTAINMENT: (Indicate Graduate and Baccalaureate Degree/Major/Field of Specialization)**

Level of Education	Course/Degree (If graduated write in full)	Major/Field of Specialization	Highest Grade/Year/Level/Units Earned (If not graduated)	School Attended/Address	Inclusive Years of Attendance		Academic Honors Received
					From	To	

**13. PRESENT EMPLOYMENT** Government  Private

Agency/Office/Address	Position Level/Salary Grade/Rank (For PNP/AFP)	Position	Length of Experience in Current Position	Status of Appointment/Employment

**14. Have you ever been dismissed from the service for cause, or found guilty of crime involving moral turpitude, disgraceful or immoral conduct, drunkenness or addiction to drugs?**

Yes  No  if YES attach copy/ies of decisions.

I declare under oath that this application from the service has been accomplished by me in good faith, verified by me and to the best of my knowledge and belief is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines.

I likewise agree that I will subject myself to a validating examination in case test results in my place of examination are statistically improbable.

\_\_\_\_\_  
Signature of Applicant

Right Thumbmark

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
CHAIR-DIVISION SUB-COMMITTEE POSITION  
(Signature above printed name)

Recently taken  
Passport Size Photo  
w/ Name Tag  
(Full Name)

[1 ½" x 2"]  
taken within 3 months

**Scanned/Digitally-  
Imaged/Photocopied  
picture NOT  
ACCEPTED**

**(Do not fill up this portion. For processor/s Only)**

Action taken: [ ] Approved [ ] Disapproved Date: \_\_\_\_\_

\_\_\_\_\_  
Printed Name and Signature of Processor

**APPLICATION RECEIPT**

Application No. \_\_\_\_\_

Received the application for the **ENGLISH PROFICIENCY TEST.**

TIME: \_\_\_\_\_ Printed Name of Processor: \_\_\_\_\_  
 DATE: \_\_\_\_\_ Signature of Processor: \_\_\_\_\_  
 PLACE: \_\_\_\_\_ Date Received/Processed \_\_\_\_\_

Applicant's Printed Name: \_\_\_\_\_  
 Birthdate: \_\_\_\_\_ Sex: \_\_\_\_\_  
 Signature: \_\_\_\_\_

Recently taken  
Passport Size Photo  
w/ Name Tag  
(Full Name)

[1 ½" x 2"]  
taken within 3 months

**Scanned/Digitally-  
Imaged/Photocopied  
picture NOT  
ACCEPTED**

Please see Back Page for  
Important Examination  
Information

**WARNING: Impersonation, cheating and other forms of examination irregularity would lead to dismissal from government service, perpetual disqualification from taking civil service examination and from entering government service and/or imprisonment.**

**BRING THE FOLLOWING ON EXAMINATION DAY**

1. This Application Form
2. One (1) Blue or Black Pen
3. Lead Pencil/s No. 2 an eraser/s
4. Valid I.D. Card with Photo, Signature, Birthdate (if available)
  - This should be the same as that presented at the time of application
  - **No. I.D., NO EXAM**

**DO NOT** bring cellular phones and other materials outside the above-listed, otherwise, they will be confiscated by the Examination Officers. The Department will not be liable for the loss or damage of said belongings