



**UNIVERSITY of SAINT LOUIS**  
Tuguegarao City, Cagayan  
Human Resource Management Office

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Photo ID

**EMPLOYMENT APPLICATION FORM**

Please fill in all the required information in **black ink**. Do not leave an item **blank**. If item is not applicable, indicate "**N/A**".

<b>Position Applied for</b>			<b>Date</b>	
<b>PERSONAL BACKGROUND</b>				
Family Name		First Name		Middle Name
Home Address			Contact Nos.	
Boarding House Address			Contact Nos.	
E-mail Address				
Date of Birth	Age	Place of Birth		Nationality
Religion	Sex	Civil Status:		No. of Children
Name of Spouse (if married)		Date of Marriage		Place (Name of Church)
Occupation of Spouse		Employer of Spouse		Address/Contact No.
<b>Children's Information</b> (please use back page, if more space is needed)				
Name		Date of Birth	Age	School where they are Studying
<b>Parents' Information</b>				
Name		Date of Birth	Age	Occupation
Father				
Mother				
<b>Brothers and Sisters' Information</b> (please use back page, if more space is needed)				
Name		Date of Birth	Age	Occupation
<b>Other Information</b>				
SSS No.		PAG-IBIG No.		TIN
				PHILHEALTH NO.
<b>EDUCATIONAL ATTAINMENT AND ACADEMIC DEGREES</b>				
<b>Level</b>	<b>School/Address</b>		<b>Year Graduated</b>	<b>Honors/Awards</b>
Elementary				
High School				
	<b>Degree Earned</b>	<b>School/Address</b>	<b>Year Graduated</b>	<b>Honors/Awards</b>
Technical/Vocational				
College				
Post Graduate				

CIVIL SERVICE AND OTHER GOVERNMENT EXAMINATIONS PASSED (PRC)					
Date of Examination (MM/DD/YY)		Examination			Rating
EMPLOYMENT HISTORY (START WITH MOST RECENT)					
Position	Name of School/Agency	Reason for Leaving	Subjects Taught <i>(for Teacher Applicants)</i>	Date (MM/YY)	
				From	To
TRAININGS/CONFERENCES/SEMINARS/WORKSHOPS/SHORT COURSES ATTENDED (in the last 3 years)					
Title of Trainings/Seminar/Conference/ Workshop/Short Courses		Inclusive Dates of Attendance	Sponsoring Agency		
MEMBERSHIP IN CIVIC, PROFESSIONAL AND RELIGIOUS ORGANIZATION					
Position		Name of Organization			
SPECIAL SKILLS AND OTHER QUALIFICATIONS (please specify)					
Computer					
Office Equipment					
Languages					
Hobbies/Sports					
Other Skills					
EMPLOYMENT IN USL (for those previously employed in USL)					
Inclusive Date of Employment		Position			
OTHER INFORMATION (please put a check on the appropriate answer)					
			Yes	No	If Yes, Please Specify
1. Have you ever been afflicted of any illness/diseases?					
2. Have you ever been charged or convicted of any crime?					
3. Have you ever been charged administratively by your previous employer/s?					

4. How did you come to know of this University?

5. How much is your expected starting salary?

6. What is your basis of the expected starting salary?

7. Discuss briefly how your characteristics, skills and knowledge can make you an asset of the University (*in not less than 100 words*).

8. Sketch of your current home address from your place to USL

REFERENCES			
Name	Company/Agency	Address	Contact No.

IN CASE OF EMERGENCY	
Contact Person	Address
Relationship	Contact Nos.

I affirm that the information I provided in this application is true and complete and that any misrepresentation, falsification or willful omission on this application shall be grounds for refusal of or dismissal from employment. I am authorizing this organization to confirm all the information I provided in connection with this application for employment.

\_\_\_\_\_  
Applicant's Signature over Printed Name

\_\_\_\_\_  
Date of Application