



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:

RECRUITING UNIT / OFFICE

- | | | |
|---------------------------------|---------------------------------|-----------------------------------|
| <input type="checkbox"/> SAF | <input type="checkbox"/> PRO 5 | <input type="checkbox"/> PRO 11 |
| <input type="checkbox"/> MG | <input type="checkbox"/> PRO 6 | <input type="checkbox"/> PRO 12 |
| <input type="checkbox"/> PRO 1 | <input type="checkbox"/> PRO 7 | <input type="checkbox"/> PRO 13 |
| <input type="checkbox"/> PRO 2 | <input type="checkbox"/> PRO 8 | <input type="checkbox"/> PRO ARMM |
| <input type="checkbox"/> PRO 3 | <input type="checkbox"/> PRO 9 | <input type="checkbox"/> PRO COR |
| <input type="checkbox"/> PRO 4A | <input type="checkbox"/> PRO 10 | <input type="checkbox"/> NCRPO |
| <input type="checkbox"/> PRO 4B | | |

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"/> WIDOWER <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 ----->					
Have 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