*Annex A to the Division Memorandum No. \_\_\_\_\_\_\_, s. 2024*

CHECKLIST OF REQUIREMENTS

Application Code:

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| Name of Applicant:  |
| Position Applied For:  |
| Office of the Position Applied For:  |
| Contact Number:  |
| Religion:  |
| Ethnicity:  |
| Person with Disability: Yes ( ) No ( ) |
| Solo Parent: Yes ( ) No ( ) |

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| Basic Documentary Requirement | Status of Submission*(To be filled-out by the* | Verification*(To be filled-out by the HRMO/HR Office/sub-committee)* |
| Status of |  |
|  | *applicant; Check if submitted)* | Submission*(Check if complied)* | Remarks |
| a. | Letter of intent addressed to the Head of Office or highesthuman resource officer |  |  |  |
| b. | Duly accomplished Personal Data Sheet (PDS)(CS Form No. 212, Revised 2017) and Work Experience Sheet, if applicable |  |  |  |
| c. | Photocopy of valid and updated PRC License/ID, if applicable |  |  |  |
| d. | Photocopy of Certificate of Eligibility/Report of Rating, ifapplicable |  |  |  |
| e. | Photocopy of scholastic/academic record such as but not limited to Transcript of Records (TOR) and Diploma, including completion of graduate and post-graduate units/degrees, ifavailable |  |  |  |
| f. | Photocopy of Certificate/s of Training, if applicable |  |  |  |
| g. | Photocopy of Certificate of Employment, Contract of Service, orduly signed Service Record, whichever is/are applicable |  |  |  |
| h. | Photocopy of latest appointment, if applicable |  |  |  |
| i. | Photocopy of the Performance Ratings in the last rating period(s) covering one (1) year performance prior to the deadlineof submission, if applicable |  |  |  |
| j. | Checklist of Requirements and Omnibus Sworn Statement on the Certification on the Authenticity and Veracity (CAV) of thedocuments submitted and Data Privacy Consent Form |  |  |  |
| k. | Other documents as may be required for comparativeassessment, such as but not limited to: |  |  |  |
|  | Means of Verification (MOVs) showing Outstanding Accomplishments, Application of Education, and Application of Learning and Development reckoned from the date of lastissuance of appointment |  |  |  |
|  | Photocopy of Performance Rating obtained from the relevant work experience, if performance rating in Item (i) is not relevantto the position to be filled |  |  |  |

Attested:

Human Resource Management Officer

**OMNIBUS SWORN STATEMENT**

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| **CERTIFICATION OF AUTHENTICITY AND VERACITY** |
| I hereby certify that all information above are true and correct, and of my personal knowledge and belief, and the documents submitted herewith are original and/or certified true copies thereof. |

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| **DATA PRIVACY CONSENT** |
| I hereby grant the Department of Education the right to collect and process my personal information as stated above, for purposes relevant to the recruitment, selection, and placement of personnel of the Department and for purposes of compliance with thelaws, rules, and regulations being implemented by the Civil Service Commission. |

Name and Signature of Applicant

Subscribed and sworn to before me this day of , year .

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| Person Administering Oath |  |
| In consonance with Republic Act No. 8792 or the "*Electronic Commerce Act of 2000* ", (e)lectronic documents shall have the legal effect, validity or enforceability as any other document or legal writing and a) (w)here the law requires a document to be in writing, that requirement is met by an electronic document if the said electronic document maintains its integrity and reliability and can be authenticated so as to be usable for subsequent reference. |  |