

Republic of the Philippines
 Department of Social Welfare and Development

PROFILE OF EMPLOYEES

 Name of Agency

<i>Name of Employee</i>	<i>Position/ Title (Indicate if Volunteer)</i>	<i>Salary (per month)</i>	<i>Place of Assignment (Indicate name of Office/Unit and location)</i>	<i>Educational Attainment</i>	<i>Relevant Training and Experience (Pls. Indicate place & date of training/experience)</i>	<i>Nationality</i>	<i>If Foreigner (Pls. specify permit/visa issued number, date issued and expiration date)</i>			<i>Date of last Examination/ Evaluation</i>	
							<i>Working Permit</i>	<i>Missionary Visa</i>	<i>Working Visa</i>	<i>Medical</i>	<i>Psychological</i>

Attested by:

Certified true and correct:

 Name and Signature of Chairman of the Board

 Name and Signature of Head of the Agency

 Date

 Date