



REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF LABOR AND EMPLOYMENT
Regional Office No. 1
PUBLIC EMPLOYMENT SERVICE OFFICE
CITY OF BATAC, ILOCOS NORTE
City/Municipality/Province



Code	FM-CPM8-07
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Effectivity Date	October 27, 2023
Issuance No	2

SPECIAL PROGRAM FOR EMPLOYMENT OF STUDENTS
(RA 7323, as amended by RAs 9547 and 10917)

Control No.: _____

SURNAME		FIRST NAME		MIDDLE NAME		SGIS BENEFICIARY/RELATIONSHIP			Passport Size Picture (3.5cm x 4.5 cm)
DATE OF BIRTH: (mm/dd/yyyy)			PLACE OF BIRTH:			CITIZENSHIP:			
CONTACT DETAILS/CELLPHONE NO.:				EMAIL ADDRESS:					
SOCIAL MEDIA ACCOUNT (FACEBOOK, TWITTER, INSTAGRAM, ETC.)									
STATUS ☐ Single ☐ Married ☐ Widow/er ☐ Separated			SEX ☐ Male ☐ Female		☐ Student ☐ ALS student ☐ out-of-school (OSY)				
CURRENT STATUS OF PARENTS: ☐ Living together ☐ Solo Parent ☐ Separated ☐ Person with Disability ☐ Senior Citizen ☐ Sugar Plantation Worker ☐ Indigenous People ☐ Displaced Worker (1) ☐ Local (2) ☐ OFW									
PRESENT ADDRESS:									
PERMANENT ADDRESS:									
FATHER'S NAME /CONTACT NO.:					MOTHER'S MAIDEN NAME/CONTACT NO.:				
OCCUPATION:					OCCUPATION:				
EDUCATION		NAME OF SCHOOL			DEGREE EARNED/COURSE		YEAR/LEVEL	DATE OF ATTENDANCE	
Elementary									
Secondary									
Tertiary									
Tech-Voc									
DOCUMENTARY REQUIREMENTS: (Original and other documents, when applicable, should be presented for validation) ☐ 1) Photocopy of Birth Certificate or any document indicating date of birth or age (age must be 15-30) ☐ 2) Photocopy of the latest Income Tax Return (ITR) of parents/legal guardian OR certification issued by BIR that the Parents/guardians are exempted from payment of tax OR original Certificate of Indigence OR original Certificate of Low Income issued by the Barangay or DSWD/CSWD where the applicant resides; and ☐ 3) For students , any of the following, in addition to requirements no. 1 and 2: ☐ a) Photocopy of proof of average passing grade such as (1) class card or (2) Form 138 of the previous semester or year immediately preceding the application; OR ☐ b) Original copy of Certification by the School Registrar as to passing grade immediately preceding semester/year if grades are not yet available ☐ 4) For Out of School Youth (OSY) , original copy of Certification as OSY issued by DSWD/CSWD or the authorized Barangay Official where the OSY resides, in addition to requirements no. 1 and 2.									
SPECIAL SKILLS:									
HISTORY of SPES Availment/ Name of Establishment					YEAR		SPES ID NO. (if applicable)		
☐ 1 st Availment									
☐ 2 nd Availment									
☐ 3 rd Availment									
☐ 4 th Availment									
Other related information/ requests/ interventions from DOLE:									
I hereby attest that the information above are true and correct to the best of my knowledge, including the attached documents / requirements which I also attest as to their veracity. I agree that any false statement would cause the automatic disqualification/ cancellation of the service/ contract/ grant and I shall refund amount received and/or pay damages to DOLE or comply with other sanctions in accordance with law. Any material change in my financial status may affect my eligibility to continue the program. _____ Signature of Applicant									
DISCLAIMER									
The personal information you provided us will be used for legal or legitimate purpose only, and it will be kept, maintained and stored in DOLE database. If your personal information is used for different purpose by unauthorized person or entity without fault or negligence on the part of DOLE it assumes neither responsibility nor liability. In case DOLE shares your personal information for legal or legitimate purpose with any other person or entity thru Data Sharing Agreement in conformity with Data Privacy Act of 2012, and data privacy is breached without fault or negligence on the part of DOLE, it likewise assumes no responsibility.									