

III. VACANCY DETAILS	
Position Title:	
Job Description:	Nature of Work: <input type="checkbox"/> Permanent <input type="checkbox"/> Internship / OJT <input type="checkbox"/> Contractual <input type="checkbox"/> Part-time <input type="checkbox"/> Project-based <input type="checkbox"/> Work from home / online job
	Place of Work:
	Salary:
	Vacancy Count:
IV. QUALIFICATION REQUIREMENTS	
Work Experience (month/s):	Religion:
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> No Preference	Civil Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> No Preference
Other qualifications:	
Accepts Disability: <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes": <input type="checkbox"/> Visual <input type="checkbox"/> Hearing <input type="checkbox"/> Speech <input type="checkbox"/> Physical <input type="checkbox"/> Others (please specify) _____	
Educational Level:	Course/major:
License:	Eligibility:
Certification:	Language/dialect Spoken:
Preferred Residence:	
Accepts: <input type="checkbox"/> PESO <input type="checkbox"/> SPES <input type="checkbox"/> GIP <input type="checkbox"/> JobStart Philippines <input type="checkbox"/> K-12 AMP <input type="checkbox"/> TraBAJO	
V. POSTING DETAILS	
Posting Date (mm/dd/year):	
Valid Until (mm/dd/year):	

CERTIFICATION/AUTHORIZATION

This is to certify that all data/information that I have provided in this form are true to the best of my knowledge. This is also to authorized the DOLE to include the establishment profile in the PESO Employment Information System (PEIS). It is understood that the establishment profile and contact details shall be made available to the jobseekers, PESOs, DOLE Regional Offices and Filed Offices, Bureau of Local Employment and others who have access to the PEIS. I am also aware that DOLE is not obliged to seek applicants on our behalf.

Signature over printed name of Authorized Representative

Date

FOR USE OF PESO ONLY. PLEASE DO NOT WRITE BELOW THIS DOTTED LINE.

Assesed by:

Encoded by:

Signature over Printed Name of Encoder

Date

Signature over Printed Name of Assessor

Date