



SPES Form 4

REPUBLIC OF THE PHILIPPINES  
 DEPARTMENT OF LABOR AND EMPLOYMENT  
 Regional Office No. \_\_\_\_\_  
 PUBLIC EMPLOYMENT SERVICE OFFICE



\_\_\_\_\_  
 City/Municipality/Province  
 SPECIAL PROGRAM FOR EMPLOYMENT OF STUDENTS (SPES)  
 (RA 7323, as amended by RA 9547)

PLACEMENT REPORT CUM GSIS INSURANCE COVERAGE

Name of Establishment/Employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Business Activity: \_\_\_\_\_ Industry Code: \_\_\_\_\_

Number of Vacancies: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Tel. No. \_\_\_\_\_

*Name of Student / ID No.	Age	Gender	Address	Contact No.	Beneficiary	Student or OSY	Educational Level	New or SPES Baby	Occupational Code & Position	Wage Rate per Day	Employment Period	Total Amount to be earned by Student	Amount to be Received for Other Benefits	Amount to be Received for Wages	GSIS Insurance / Policy

**Note:** This form shall be accomplished by the Public Employment Service Office to be submitted to the DOLE Regional Office not later than (five) 5 days immediately after the date of placement.  
 (\*LAST NAME, FIRST NAME, MIDDLE INITIA)

Prepared by:

Submitted by:

\_\_\_\_\_  
 Name, Designation and Signature

\_\_\_\_\_  
 Signature of PESO Manager

\_\_\_\_\_  
 Date Prepared