

BACKGROUND INVESTIGATION FORM

Please fill all information in PRINTED. If item is not applicable put "N/A"

CANDIDATE'S DETAILS						
Applicant's Name:	Surname		Given Name	Comple	ete Middle Name	Suffix (Jr./Sr/ III,etc)
Civil Status:				•		
				•		
		Email Address:				
		Philhealth Number:				
	ag-ibig Number: Tax Identification Number:					
Current Address:						
Permanent Address:						
ADDRESS CHECK						
ease provide a sketch	of your curr	ent addres	SS			
EMERGENCY CONTAC	T PERSON:					
Contact 1:		Relationsh	nip:		Contact Numbe	r:
Contact 2:		Relationsh	nip:		Contact Numbe	r:
RELATIVES WORKING	i IN					
Name			Relationshi	p		Position

BACKGROUND INVESTIGATION

AUTHORIZATION FOR EDUCATION CHECK

To the Registrar's Office

To whom it may concern:	
This is to authorize confirmation and verification through their official representative, on my education	fication of, tion records based on my declared information below:
Highest Education Attainment: O Post-Graduate Degree (Doctorate, Masters) O Post-Graduate Level (Doctorate, Masters) O College Graduate O 1st year College (Completed OR With back su O 2nd year College (Completed OR With back su O 3rd year College (Completed OR With back su O 4th year College (Completed OR With back su O Diploma/ Associate/ Vocational Course (speci	ubjects) ubjects)
Name of Institution (College/Post Graduar Address / Branch:	aduate only) MM/DD/YYYY://
Address / Branch:	DI Graduate only) MM/DD/YYYY://
Thank you.	
Signature over Printed Name / Date Signed	

1. NAME OF ORGANIZATION: ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY):	EMPLOYMENT HISTORY DETAILS				
ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY): / / / / / / /	1. NAME OF ORGANIZATION:				
POSITION (Upon hiring):					
NATURE OF EMPLOYMENT: Full-Time Part-Time Self-Employed Internshi IMMEDIATE SUPERVISOR: CONTACT NUMBER: Reason for Leaving: Recruiter Remarks (R/O): 2. NAME OF ORGANIZATION: ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY): / _ / _ To (MM/DD/YYYY): / _ / _ POSITION (Upon hiring): POSITION (Upon leaving): NATURE OF EMPLOYMENT: Full-Time Part-Time Self-Employed Internshi IMMEDIATE SUPERVISOR: Recruiter Remarks (R/O): 3. NAME OF ORGANIZATION: ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY): / _ / _ To (MM/DD/YYYY): / _ / _ POSITION (Upon hiring): POSITION (Upon leaving): NATURE OF EMPLOYMENT: Full-Time Part-Time Self-Employed Internshi IMMEDIATE SUPERVISOR: CONTACT NUMBER: Reason for Leaving: Recruiter Remarks (R/O): 4. NAME OF ORGANIZATION: ADDRESS: CONTACT NUMBER: Reason for Leaving: Recruiter Remarks (R/O): 4. NAME OF ORGANIZATION: ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY): / _ / _ To (MM/DD/YYYY): / _ / _ POSITION (Upon hiring): POSITION (Upon leaving): NATURE OF EMPLOYMENT: Full-Time Position (Upon leaving): NATURE OF EMPLOYMENT: Full-Time Position (Upon leaving): NATURE OF EMPLOYMENT: Full-Time Part-Time Self-Employed Internshi IMMEDIATE SUPERVISOR: CONTACT NUMBER: Recruiter Remarks (R/O): Recruiter Remarks (R/O	EMPLOYMENT DATE From (MM/DD/YYYY):	///To (MM/DD/YYYY)://			
IMMEDIATE SUPERVISOR:	POSITION (Upon hiring):	POSITION (Upon leaving):			
Reason for Leaving: Recruiter Remarks (R/O): 2. NAME OF ORGANIZATION:	NATURE OF EMPLOYMENT: □ Full-Time	□ Part-Time □ Self-Employed □ Internship			
2. NAME OF ORGANIZATION: ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY): POSITION (Upon hiring): NATURE OF EMPLOYMENT: IMMEDIATE SUPERVISOR: Reason for Leaving: Reason for Leaving: Reson for Leaving: POSITION (Upon leaving): Recruiter Remarks (R/O): To (MM/DD/YYYY): To (MM/DD/YYYY): POSITION (Upon hiring): POSITION (Upon leaving): NATURE OF EMPLOYMENT: IMMEDIATE SUPERVISOR: Reason for Leaving: POSITION (Upon leaving): NATURE OF EMPLOYMENT: IMMEDIATE SUPERVISOR: Reason for Leaving: Reason for Leaving: Recruiter Remarks (R/O): ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY): POSITION (Upon leaving): Recruiter Remarks (R/O): NATURE OF EMPLOYMENT: ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY): POSITION (Upon hiring): POSITION (Upon leaving): NATURE OF EMPLOYMENT: POSITION (Upon leaving): NATURE OF EMPLOYMENT: POSITION (Upon leaving): NATURE OF EMPLOYMENT: Reason for Leaving: Recruiter Remarks (R/O): Recruiter Remarks (R/O): Recruiter Remarks (R/O):	IMMEDIATE SUPERVISOR:	CONTACT NUMBER:			
ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY):/	Reason for Leaving:				
ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY):/	2. NAME OF ORGANIZATION:				
POSITION (Upon hiring):					
NATURE OF EMPLOYMENT:	EMPLOYMENT DATE From (MM/DD/YYYY):	//To (MM/DD/YYYY)://			
IMMEDIATE SUPERVISOR: CONTACT NUMBER: Reason for Leaving: Recruiter Remarks (R/O):	POSITION (Upon hiring):	POSITION (Upon leaving):			
Reason for Leaving:	NATURE OF EMPLOYMENT: □ Full-Time	□ Part-Time □ Self-Employed □ Internship			
3. NAME OF ORGANIZATION: ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY): POSITION (Upon hiring): NATURE OF EMPLOYMENT: IMMEDIATE SUPERVISOR: Reason for Leaving: ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY): ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY): POSITION (Upon hiring): NATURE OF EMPLOYMENT: POSITION (Upon leaving): NATURE OF EMPLOYMENT: Reason for Leaving: Recruiter Remarks (R/O): Recruiter Remarks (R/O): Recruiter Remarks (R/O):	IMMEDIATE SUPERVISOR:	CONTACT NUMBER:			
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EMPLOYMENT DATE From (MM/DD/YYYY):	3. NAME OF ORGANIZATION:				
POSITION (Upon hiring):	ADDRESS:				
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IMMEDIATE SUPERVISOR:	POSITION (Upon hiring):	POSITION (Upon leaving):			
Reason for Leaving:	NATURE OF EMPLOYMENT: □ Full-Time	□ Part-Time □ Self-Employed □ Internship			
4. NAME OF ORGANIZATION: ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY): POSITION (Upon hiring): NATURE OF EMPLOYMENT: IMMEDIATE SUPERVISOR: Reason for Leaving: Recruiter Remarks (R/O):	IMMEDIATE SUPERVISOR:	CONTACT NUMBER:			
ADDRESS: EMPLOYMENT DATE From (MM/DD/YYYY):/	Reason for Leaving:	Recruiter Remarks (R/O):			
EMPLOYMENT DATE From (MM/DD/YYYY):/					
NATURE OF EMPLOYMENT: Full-Time Part-Time Self-Employed Internship IMMEDIATE SUPERVISOR: CONTACT NUMBER: Reason for Leaving: Recruiter Remarks (R/O):					
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IMMEDIATE SUPERVISOR: CONTACT NUMBER: Reason for Leaving: Recruiter Remarks (R/O):					
	E NAME OF ODGANIZATION.				
5. NAME OF ORGANIZATION:ADDRESS:					
EMPLOYMENT DATE From (MM/DD/YYYY):/					
POSITION (Upon hiring): POSITION (Upon leaving):					
NATURE OF EMPLOYMENT: □ Full-Time □ Part-Time □ Self-Employed □ Internshi IMMEDIATE SUPERVISOR: CONTACT NUMBER:		. ,			
Reason for Leaving:					

NOTE: If you have more than 5 employment history, please add another sheet of employment history details.

PROFESSIONAL CHARACTER REFERENCE

Please provide us details of four (10) professional character references who have known you from your previous job(s). These character references should be your Immediate Supervisor, Manager, or Colleague.

FOR FRESH GRADUATES: Please provide us details of four (10) character references who have known you in the last 3 years. (Highschool Teacher / Professors/ Instructors / OJT Supervisor)

Note: Friends and relatives are NOT valid references.

PROFESSIONAL CHARACTER REFEREN	CE 1	
NAME OF REFERENCE	RELATIONSHIP:	
COMPANY & POSITION:	CONTACT DETAILS:	
PROFESSIONAL CHARACTER REFEREN	CE 2	
NAME OF REFERENCE	RELATIONSHIP:	
COMPANY & POSITION:	CONTACT DETAILS:	
PROFESSIONAL CHARACTER REFEREN	CE 3	
NAME OF REFERENCE	RELATIONSHIP:	
COMPANY & POSITION:	CONTACT DETAILS:	
PROFESSIONAL CHARACTER REFEREN	CE 4	
NAME OF REFERENCE	RELATIONSHIP:	
COMPANY & POSITION:	CONTACT DETAILS:	
PROFESSIONAL CHARACTER REFEREN	CE 5	
NAME OF REFERENCE	RELATIONSHIP:	
COMPANY & POSITION:	CONTACT DETAILS:	
PROFESSIONAL CHARACTER REFEREN	CE 6	
NAME OF REFERENCE	RELATIONSHIP:	
COMPANY & POSITION:	CONTACT DETAILS:	
PROFESSIONAL CHARACTER REFEREN	CE 7	
NAME OF REFERENCE	RELATIONSHIP:	
COMPANY & POSITION:	CONTACT DETAILS:	
PROFESSIONAL CHARACTER REFEREN	CE 8	
NAME OF REFERENCE	RELATIONSHIP:	
COMPANY & POSITION:	CONTACT DETAILS:	
PROFESSIONAL CHARACTER REFEREN	CE 9	
NAME OF REFERENCE	RELATIONSHIP:	
COMPANY & POSITION:	CONTACT DETAILS:	
PROFESSIONAL CHARACTER REFEREN	CE 10	
NAME OF REFERENCE	RELATIONSHIP:	
COMPANY & POSITION:	CONTACT DETAILS:	

AUTHORIZATION		
I hereby declare that all information provided in this form are true to the best of falsified or malicious information in this application will be sufficient grounds f applicant) or dismissal (if employed) upon discovery. I also confirm that all the individuals I provided in this form are provided with their knowledge and constresponsible to them for my disclosure of their information to	or withdrawal of offer (if e personal information of other sent, and that I undertake to be	
I authorize, its agents, representation providers to verify and confirm any and all information pertinent to my education personal background and history, and is not limited to the information provides with my previous employers, school and other relevant individuals.	ional, employment and	
I affirm and consent to the disclosure and sharing of my personal information information, to, its agents, rep party providers, for the said Purpose.		
I hereby release, discharge and hold free and harmless, agents, representatives and/or third party providers, and the disclosing individed and controls my personal information, with regard to any above-mentioned shapprocessing of my personal information and sensitive personal information.	· · · · · · · · · · · · · · · · · · ·	
I am executing this form and providing my consent, willingly and voluntarily, wintimidation from the company	vithout compulsion and	
PRINTED NAME AND SIGNATURE: DATE:		