Republika ng Pilipinas
Kagawaran ng Edukasyon
Rehiyon V (Bikol)
TANGGAPANG PANSANGAY NG MGA PAARALAN NG LUNGSOD IRIGA

CONTROL No.: **ADM / PER2-**_____-_____

REQUEST FORM FOR PERSONNEL RECORDS

Requirement: photocopy of 1 valid government issued I.D

☐ **Service Record** ☐ **Certificate of Employment** ☐ **Certificate of Leave of Absence Without Pay** **Others:**

NAME OF REQUESTING PARTY *(Please print)*

Employee/Retiree: _____

Surname First Name Middle Name

Maiden Name for married woman: _____ Date of Birth: _____

Place of Birth: _____ Address: _____

Purpose of Request: _____ Accomplished By: _____

_____

_____ _____

Employee / Retiree
Signature over Printed Name

Authorized Representative
Signature over Printed Name

(Must be duly authorized in writing. ***Please attach authorizarion letter.)***

PERSONNEL DATA *(Please print. Please use back portion, if necessary)*

POSITION / STATUS	EFFECTIVITY / DATE OF APPOINTMENT/S	SCHOOL / OFFICE

RELEASE OF REQUEST/S

Issued/Released By: _____
(Printed Name & Signature) Personnel In-charge

Received By: _____ Date _____
Signature of Requesting Party

ACTION TAKEN ☐ Available Records ☐ No Available Recods ☐ Photocopy ☐ Printout copy

Receiving Officer _____

1st Verifier _____ Date/Time _____

2nd Verifier _____ Date/Time _____

Referred To _____

Approved By _____

Issued/Released By _____
Records Personnel