

POSITION APPLIED FOR \_\_\_\_\_ EXPECTED SALARY \_\_\_\_\_ DATE \_\_\_\_\_

PERSONAL DATA														
NAME					<b>RECENT PHOTO 2 x 2</b>									
<small>First Name</small>		<small>Middle Name</small>								<small>Last Name</small>			<small>Nick Name</small>	
GENDER	<input type="checkbox"/> Male <input type="checkbox"/> Female	AGE	HEIGHT	WEIGHT						CITIZENSHIP				
CIVIL STATUS	<input type="checkbox"/> Single, living w/ parents <input type="checkbox"/> Married, living together	<input type="checkbox"/> Single, living w/ siblings/relatives <input type="checkbox"/> Married, legally separated	<input type="checkbox"/> Single w/ natural child <input type="checkbox"/> Married (widow / widower)	<input type="checkbox"/> Single with minor dependents (guardian, adopted) <input type="checkbox"/> Single, cohabiting						NO. OF CHILDREN				
BIRTHDATE <small>(mm/dd/yyyy)</small>														
RELIGION					E-MAIL ADDRESS									
PLACE OF BIRTH		<small>No. / Street</small>			<small>Brgy.</small>			<small>City / Municipality</small>		<small>Province</small>				
SSS / GSIS NO.			TIN NO.			PAG-IBIG NO.			PHILHEALTH NO.					
PRESENT ADDRESS								TEL. NO.						
<small>No. / Street</small>								<small>Brgy.</small>		<small>City / Municipality</small>		<small>Province</small>		
PROVINCIAL ADDRESS								TEL. NO.						
<small>No. / Street</small>								<small>Brgy.</small>		<small>City / Municipality</small>		<small>Province</small>		
NAME OF FATHER					OCCUPATION									
<small>First Name</small>		<small>Middle Name</small>			<small>Last Name</small>									
NAME OF MOTHER					OCCUPATION									
<small>First Name</small>		<small>Middle Name</small>			<small>Last Name</small>									
PARENTS ADDRESS								TEL. NO.						
<small>No. / Street</small>		<small>Brgy.</small>			<small>City / Municipality</small>			<small>Province</small>						
NAME OF SPOUSE					OCCUPATION		NAME OF COMPANY		TEL. NO.					
<small>First Name</small>		<small>Middle Name</small>			<small>Last Name</small>									
FAMILY MEMBERS (Including siblings, children, parents, relatives)														
NAME				AGE		RELATIONSHIP		OCCUPATION						
IN CASE OF EMERGENCY, PLEASE NOTIFY					ADDRESS				TEL. NO.					
WORK HISTORY (start from last job)														
COMPANY NAME			INCLUSIVE DATES		POSITION		SALARY		NATURE OF WORK					
REASON FOR LEAVING LAST JOB														

EDUCATIONAL PROFILE				
	NAME OF SCHOOL	DEGREE / COURSE	INCLUSIVE DATES	HONORS / AWARDS
HIGH SCHOOL				
COLLEGE				
GRADUATE SCHOOL				
GOVERNMENT EXAMINATIONS TAKEN			RATING	
SEMINARS/TRAININGS ATTENDED				
TOPIC / SUBJECT	SPONSORED / CONDUCTED BY		INCLUSIVE DATES	
ORGANIZATIONAL MEMBERSHIP				
NAME OF ORGANIZATION / CLUB	POSITION HELD		DATE JOINED	
OTHER ABILITIES / SKILLS				
LEGAL PROFILE				
A. Are you related within the third degree either of affinity/consanguinity to any person in Savings Bank of Makati, Inc.? If yes, indicate name _____			YES ( )	No ( )
B. Have you ever been charged and/or convicted for a crime or violation of any law or regulation before/by an any court or tribunal? If yes, please specify: _____			YES ( )	No ( )
C. Have you ever been dismissed or forced to resign from any employment? If yes, please specify: _____			YES ( )	No ( )
D. Are you or any member of your immediate family engaged directly or indirectly in any activity or have/has any financial interest in any business competing or in conflict with the business interest of Savings Bank of Makati, Inc.? If yes, please specify: _____			YES ( )	No ( )
EXISTING LOANS				
A. Do you have an existing loan in any Financial Institution / Bank? If yes, please specify type of loan and Bank / Financial Institution: _____			YES ( )	No ( )
B. Are you an existing Credit Card Holder? If yes, please specify Credit Card Company: _____			YES ( )	No ( )
CHARACTER REFERENCES				
NAME	ADDRESS	TEL. NO.	RELATIONSHIP	
WAIVER				
<p>I hereby certify that all information given in this application are true and correct and I fully understand that any false statements will be sufficient cause for my separation / termination from service upon discovery hereof. I understand that prior to my employment, the Bank will require me to undergo and pass a pre-employment physical / psychological examination.</p> <p>I authorize Management to withhold payment of my wages corresponding to one month upon submission of my letter of resignation.</p> <p>I further authorize the Bank or its appointed representative/s to investigate all facts concerning my skills, character, background and such other information as are pertinent to my qualifications.</p>				
<p>_____</p> <p>(Signature of Applicant / Date Signed)</p>				