

PHOTO
1" X 1"

SHEET IS FOR OFFICE
RECORD ONLY AND
DOES NOT IMPLY THERE IS
A POSITION OPEN



e n e r g y
DEVELOPMENT CORPORATION

APPLICATION FOR EMPLOYMENT

EM 042 (REV 02/26/19)

POSITION APPLIED FOR	DESIRED SALARY	DATE AVAILABLE FOR WORK
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PERSONAL	PRINT NAME (Family Name) (First Name) (Middle Name)			CITIZENSHIP			
	PRESENT ADDRESS					E-MAIL ADDRESS	
	PERMANENT ADDRESS				MOBILE NO.	HOME/OFFICE NO.	
	DATE OF BIRTH (mm/dd/yyyy)	PLACE OF BIRTH	LANGUAGE & DIALECTS	SPEAK	WRITE		
	SSS NO	TAX ID NO	PHILHEALTH NO.	PAG-IBIG NO.			
	MARITAL STATUS	FULL NAME OF SPOUSE				NO OF CHILDREN	NO. OF OTHER DEPENDENTS
	OCCUPATION OF SPOUSE/PARENT (Indicate Name, Position, & Place of Work)			IN CASE OF EMERGENCY, NOTIFY (Indicate Name, Address, Tel. No., Relationship)			
	RELATIVE(S) CURRENTLY EMPLOYED BY THE COMPANY			COMPANY/LOCATION	RELATIONSHIP		
	HAVE YOU EVER APPLIED WITH OR BEEN EMPLOYED BY THIS COMPANY? <input type="checkbox"/> YES <input type="checkbox"/> NO			IF YES, INDICATE WHEN AND WHERE			
	ARE YOU WILLING TO ACCEPT PROVINCIAL ASSIGNMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO			IF YES, WHERE?			
EDUCATION	TYPE OF SCHOOL	NAME OF SCHOOL & LOCATION	NO OF YEARS FINISHED	YEAR GRADUATED	DEGREE AND MAJOR	SCHOLASTIC HONOR	
	HIGH SCHOOL						
	COLLEGE OR UNIVERSITY						
	GRADUATE OR OTHER FORMAL EDUCATION						
	WHAT ARE YOUR PRESENT PLANS FOR IMPROVING YOUR EDUCATION?						
TAKING ANY COURSE NOW? (Indicate What & Where)							
GOVT EXAM	NAME OF EXAM(S) TAKEN	LICENSE NO	DATE TAKEN	RATING/GRADE			
ACTIVITIES	ATHLETIC ACTIVITIES (College Sports)	ACTIVITIES OTHER THAN ATHLETICS (Publications, Class Organizations, Clubs, etc.)	HOBBIES & OUTSIDE INTEREST (Including Civic Activities)				

WORK EXPERIENCE	NAME AND ADDRESS OF EMPLOYER (Start with present or most recent employer)	DATES	POSITION / NATURE OF WORK	MONTHLY SALARY
	COMPANY	FROM		
		TO		
	COMPANY	FROM		
		TO		
COMPANY	FROM			
	TO			
COMPANY	FROM			
	TO			
OTHER INFORMATION	OTHER SPECIALSKILLS/ABILITIES?			
	WHAT TYPE OF WORK WOULD YOU LIKE TO GET INTO EVENTUALLY?			
	ANY SERIOUS ILLNESS? WHEN?		ANY PHYSICAL DEFECT OR WEAKNESS?	
	FOR COMPANY STATISTICS ONLY THROUGH WHAT CHANNEL WAS YOUR APPLICATION MADE? (Please Check.) <input type="checkbox"/> EDC WEBSITE <input type="checkbox"/> ONLINE ADVERTISEMENT <input type="checkbox"/> JOB FAIR, RECRUITMENT EVENTS, ETC. <input type="checkbox"/> REFERRED BY EDC EMPLOYEE - REFERRED BY _____			
DATA PRIVACY	By signing this Consent Statement, you understand and fully consent to the collection, recording, organization, storage, updating, retrieval, use, consolidation, sharing, and retention of your Personal Information and Sensitive Personal Information ("Personal Data") by Energy Development Corporation ("EDC") for recruitment and hiring purposes[b1] . Rest assured that EDC shall implement the necessary and appropriate safeguards for the protection of your Personal Data as may be consistent with its obligations under Republic Act No. 10173 or the Data Privacy Act of 2012, its Implementing Rules and Regulations and other issuances of the National Privacy Commission. EDC shall only retain your Personal Data for such period of time as may be necessary for the accomplishment of the purpose mentioned above. If you have any questions or concerns regarding the privacy and processing of your Personal Data, you may contact EDC's Data Protection Officer at EDC-DPO@energy.com.ph or (02) 755-2332 local 2607.			
	PRINTED NAME	SIGNATURE		DATE SIGNED
EMPLOYEE UNDERTAKING	I authorize Energy Development Corporation (EDC) and its employees, representatives, partner companies and vendors to verify information provided in my resume/application form for employment purposes and to conduct enquiries as may be necessary at the company's discretion. This includes checking on my identity, address, credit, court, criminal and business records including my education, license and employment details. I hereby certify that the above information are true and correct, and I relieve the company from any liability arising from the verification of the above information. I understand that any false statement or data in this information sheet discovered at any time during my employment may result disciplinary action. Furthermore, I commit to voluntary update my records with the company, submitting necessary forms as soon as there will be changes in my personal status.			
	PRINTED NAME	SIGNATURE		DATE SIGNED
FOR HR USE	REMARKS			