



GENERAL INSTRUCTION : Kindly fill out all the information needed and do not leave any box unmarked. Write N/A in items no applicable to you.					
Date of Application (MM/DD/YYYY):					
Desired Position:		1.		2.	
Are you willing to accept position not mentioned above?		[] YES [] NO		Are you willing to accept short term employment?	
Are you willing to accept field work?		[] YES [] NO		Is this your first time to apply with us?	
Driving Skills: [] 4-wheels [] Motorcycle [] None		Do you have a valid driver's license:		[] YES [] NO	
Do you have relatives in GM Bank? [] YES [] NO If yes, please specify _____		How did you learn about our vacancy? [] Website [] Radio [] Print Ad		[] Referral [] others, please specify	
Are you willing to be assigned in any of our branches? [] YES [] NO		Expected Salary:			
If no, kindly indicate your preferred assignment:					
[] Nueva Vizcaya		[] La Union		[] Pampanga	
[] Nueva Ecija		[] Pangasinan		[] Bulacan	
[] Maria Aurora		[] Tarlac		[] Zambales	
PERSONAL INFORMATION:					
Complete Name:					
Last Name		First Name		Middle Name	
Birthday (MM/DD/YYYY):			Birthplace:		
Gender: [] Male [] Female		Citizenship: [] Filipino [] Others			
Civil Status: [] Single [] Single Parent [] Married [] Separated/Divorced/Annulled [] Widowed					
Religion:		Height:		Weight (lbs)	
TIN:		SSS:		PhilHealth #:	
				Pag-Ibig #:	
City Address					
Home No. and Street					
Subdivision/Barangay					
Municipality/City		Province:			
Zip Code		Contact Number:			
EDUCATIONAL AND PROFESSIONAL BACKGROUND					
Education					
	Inclusive yrs of attendance	Degree/Course Earned	Name and Address of School	Academic Honors	
Elementary					
High School					
College					
Graduate School					
Vocational School					
Special Course					
Government Licensure Exams					
Government Licensure Exams			Date Taken		Rating (%)



Previous Employment (please indicate all position held for each employer)						
Employer's Name, Address, Contact Details	Position	Inclusive Dates (mm/yyyy to mm/yyyy)	Name of Immediate Superior	Contact Details	Salary and allowances	Reason for leaving
Training and Seminars Attended			Organizational Affiliations			
Title/ Description	Name of sponsor/ Facilitator	Date	Name of Organization	Position	Inclusive Dates of Membership (mm/yyyy to mm/yyyy)	
OTHER INFORMATION:						
Medical/Health History						
When was the last time you were admitted to the hospital?			Reason for admission:			
Health History:	<input type="checkbox"/> vision impairment <input type="checkbox"/> high blood <input type="checkbox"/> asthma			<input type="checkbox"/> allergies <input type="checkbox"/> others please specify		
Have you been guilty of any administrative offense?		<input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please specify				
Have you been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please specify:				
Have you been separated from service in any of the following modes: dismissal/termination, AWOL, none permanency in the public or private sector?		<input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please specify				
Why do you want to work in GM Bank of Luzon, Inc.?						
What can you contribute for the benefit of the bank?						
What are your greatest achievements in you past employment? (give at least 3)						
Give at least 3 challenging experience at work and how did you manage it						
Do you have other pending application?		<input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please specify				



FAMILY REFERENCES:			
Name of Spouse:		Name of Father:	
Address:		Address:	
Occupation:		Occupation:	
Company/ Employer:		Company/ Employer:	
Other sources of income:		Other sources of income:	
Contact No.		Contact No.	
Name of Mother:		Sibling 1:	
Address:		Address:	
Occupation:		Occupation:	
Company/ Employer:		Company/ Employer:	
Other sources of income:		Other sources of income:	
Contact No.		Contact No.	
Sibling 2:		Sibling 3:	
Address:		Address:	
Occupation:		Occupation:	
Company/ Employer:		Company/ Employer:	
Other sources of income:		Other sources of income:	
Contact No.		Contact No.	
Sibling 4:		Sibling 5:	
Address:		Address:	
Occupation:		Occupation:	
Company/ Employer:		Company/ Employer:	
Other sources of income:		Other sources of income:	
Contact No.		Contact No.	

CREDIT/LOAN ACCOUNT BACKGROUND:				
	I	II	III	IV
Name of firm				
Type of account				
Amount of loan				
Date granted				
Date due				
Status				

I certify that the above information and statements are true and correct and hereby agree that any misleading or inaccurate matters included in this form shall serve as concrete ground for the invalidity of my application or cessation of my employment with the bank.

Further, I hereby consent and authorize GM Bank, Inc. to have a background or character investigation (whichever is appropriate for the job for which I am applying) conducted of me by any person who is suitable to and chosen by the GM Bank, Inc. and its affiliate banks.

I understand that as part of the investigation, the authorized investigators may check among my other records, my credit, tax and police records and information sought may concern my character, general reputation, personal characteristics, and mode of living.

I understand that GM Bank, Inc., in its sole discretion may deny me employment based on the result of the investigation

I understand that my refusal to sign in this form and submit to the investigation will result in my not being considered for employment with GM Bank of Luzon, Inc.

_____ **Signature over Printed Name**

_____ **Date**