



S.L. DEVELOPMENT CONSTRUCTION CORPORATION

2F, Rusland Building, 1932 F. Agoncillo Street, Malate, Manila 1004 Philippines
Tel. Nos. (63 2) 353-1901, 353-1570, 353-1569, 353-1559 / Telefax No. (63 2) 353-1568
E-mail: sldecorp@sldec.net

APPLICANT INFORMATION SHEET

HR Action	
☐	<i>For 2nd Interview</i>
☐	<i>For Final Interview</i>
☐	<i>Disqualified</i>
☐	<i>Active File</i>

Date of Application: _____
Desired Position: _____

1 x 1 photo

PERSONAL INFORMATION					
Name		Last Name	First Name	Middle Name	Nickname
Present Address					
Permanent Address					
Tel. No.		Cell. No.		E-mail Address	
Date of Birth		Place Of Birth		Age	
Height		Weight		Gender	
SSS No.				Civil Status	
TIN No.				PAG-IBIG No.	
				License No.	
Philhealth No.					
Language/Dialect Spoken					
Skills and Interests					

WORK HISTORY						
	COMPANY NAME	ADDRESS (City)	JOB TITLE	INCLUSIVE DATES		REASON FOR LEAVING
				FROM	TO	
1						
2						
3						
4						

EDUCATIONAL BACKGROUND			
SCHOOL NAME & ADDRESS	DEGREE EARNED	YEAR GRADUATED	HONORS/AWARDS
Post Graduate			
Graduate			
Vocational			
High School			
Elementary			
Gov't Exams Taken:	Place of Exam:	Rating:	

TRAININGS & SEMINARS ATTENDED			
DATE	TITLE (TOPIC)	TRAINING PROVIDER	VENUE
1			
2			
3			
4			

FAMILY INFORMATION				
Father				
Mother				
Brothers & Sisters				
Spouse				
Children				

CHARACTER REFERENCE (Not Related To You)					
	NAME	RELATIONSHIP	OCCUPATION	ADDRESS	CONTACT NO.
1					
2					
3					

How did you know of the opening? ☐ Walk-in ☐ Newspaper Ad ☐ Online Ad ☐ School Placement ☐ Referral of _____ ☐ Others (Please Specify) _____	Name of person you know in this company: Relation to you: _____ Had there been any criminal charges against you? _____ If Yes, please give details: _____
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I hereby certify that the statement I made in this application are true and correct and any falsification shall be sufficient reason for dismissal from or refusal of employment by this Company. Authorization is hereby given to the company to further investigate the accuracy and completeness of the information contained herein.

I agree to submit myself to physical examination as pre-requisite for employment.

Employee Signature Over Printed Name

Date