

CS Form No. 100 (Revised 2012)		1200184
XX	Promulgated:	24 JAN 2012

RESOLUTION

WHEREAS, Article IX-B, Section 2 (2) of the 1987 Philippine Constitution provides that appointments in the civil service shall be made only according to merit and fitness to be determined, as far as practicable, and, except to positions which are policy-determining, primarily confidential, or highly technical, by competitive examination;

WHEREAS, Sections (1) and (7), Title I, Book V of Executive Order No. 292 provides that the Career Service shall be characterized by entrance based on merit and fitness to be determined as far as practicable by competitive examination;

WHEREAS, Item 8, Section 12, Chapter 3 of Book V of Executive Order No. 292, provides that the Civil Service Commission (CSC) shall have the power to prescribe all forms for Civil Service examinations, appointments, reports and such other forms as may be required by laws, rules and regulations;

WHEREAS, examinees do not fully accomplish or give wrong information in the present application form (CS Form No. 100, Revised 2008), which may indicate that the form is not user-friendly or cannot be easily understood;

WHEREAS, CSC Resolution No. 1100300 dated March 1, 2011, amended the Frequency Policy of Taking Career Service Examinations stipulating, among others, that there is no limit to the number of times an examinee can take the same level of examination, as long as it was not taken in less than three (3) months;

WHEREAS, with the amendment of the examination policy in CSC Resolution No. 1100300 and to make the application form more comprehensible and a lot easier to accomplish on the part of its clientele, there is a need to update and enhance the present form;



WHEREFORE, the Commission hereby **RESOLVES** to adopt the new Civil Service (CS) Form No. 100, Revised 2012, to be used for Civil Service Examinations starting CY 2012.

Quezon City.

FRANCIS O T. DUQUE III
Chairman

MARY ANN Z. FERNANDEZ-MENDOZA

Commissioner

On Leave
RASOL L. MITMUG
Commissioner

Attested by:

DOLORES B. BONHACIO

Director IV

Commission Secretariat and Liaison Office

Δ	PPI	IC A	TION	NO.

	To be filled-out by Applicant	For Processor ONLY	
	Examination Applied For:	CSC Regional Office	
	Mode ☐ Paper-and-Pencil Test (PPT)		ID PH
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<u>at</u> Instructions: READ ADMISSION AND APPLICATION REQUIREMENTS AT THE BACK PAGE. DO NOT APPLY IF NOT QUALIFIED. Fill in all the required information. DO NOT leave an item blank. If item is not applicable, indicate "N/A". All applications must be filed PERSONALLY by applicant. CSID NO. (if any) (First Name) (Ext. Name, i.e. Jr./Sr., if eny) (Middle Name) (M.L) NAME (Last Name) A. FACTS OF BIRTH (Country) (Province) PLACE OF BIRTH (City / Municipality) DATE OF BIRTH (mm/dd/yyyy) SEX AGE ☐ Male ☐ Female MOTHER'S MAIDEN NAME (First Name) (Middle Name) (Last Name) CITIZENSHIP B. CURRENT DEMOGRAPHIC DATA (Subdivision) (Street Name) (House / Lot / Block / Phase No.) PERMANENT/MAILING ADDRESS (Room / Floor / Unit No. / Bldg. Name) ZIP CODE (City / Municipality) (Province) (Country) (Barangay) CIVIL STATUS WEIGHT (kg) HEIGHT (meters) ☐ Annulled ☐ Others □ Widowed Legally Separated ☐ Single ☐ Married E-MAIL ADDRESS (Required) TELEPHONE NUMBER/S (include Area Code) MOBILE NUMBER (Required) C. EDUCATIONAL BACKGROUND If Graduated If Not Graduated **Highest Grade** Name of School & Address (City/Municipality & Province) Level of Education Course/Degree Title Academic Honors Year Year of Last Level/ Units Earned Graduated Received Doctorate Master's College Vocational/Technical High School Elementary D. INFORMATION ON GOVERNMENT EXAMINATIONS PASSED / CIVIL SERVICE ELIGIBILITY Place of Examination Rating Obtained Date of Examination / Title of Examination Passed / Title of Eligibility Granted Date Eligibility Granted Date Accomplished Signature over Printed Name of Applicant DO NOT FILL-OUT THE SHADED PORTION. (FOR PROCESSOR ONLY). Date: Identification/Other Documents Presented: ACTION TAKEN: APPROVED DISAPPROVED [Amount: Reason: Signature over Printed Name of Processor / Date Name of Collecting Officer APPLICATION NO. APPLICATION RECEIPT Examination Applied For: PPT CAT Professional SubProfessional Others O.R. No. PLACE: TIME: DATE: Amount:

Name of Collecting Officer Date Received / Processed Signature over Printed Name of Processor

To be filled-out by Applicant

ID PHOTO

(see Specifications at

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