

Republic of the Philippines
CIVIL SERVICE COMMISSION
 Batasan Hills, Quezon City

CS Form 101-B (Revised, Dec. 2011)
 THIS FORM IS NOT FOR SALE.
 REPRODUCTION IS ALLOWED.

Recent ID Photo
 - Passport size (4.5 cm x 3.5 cm)
 - White background
 - In close-up shot (from shoulder level up with head & face occupying at least 80% of the picture and with name tag at approx. 1" below the chin)
 - In bare face (without eye glasses/colored contact lens/any facial accessory; facial features not computer-enhanced)
 - Showing left and right ears
 - With hand-held & written (not computerized) and legible name tag showing signature over complete printed name in the format FN-MI-LN-EN

**Application for Grant of Eligibility Pursuant to E.O. 132/790
 (Veteran Preference Rating)**

INSTRUCTIONS: Fill in the required information. Put "n/a" for items not applicable to you. Submit this Form, together with the documentary requirements, to the CSC Regional/Field Office concerned. (Note: This Form may be accomplished either handwritten, typewritten, or computer printed, provided that the signature of the applicant should be handwritten. Digital/scanned signature is strictly not allowed.)

1. APPLICANT'S NAME: _____
Last name First name Ext. name Middle name Middle initial

2. MOTHER'S MAIDEN NAME: _____
Last name First name Middle name

3. COMPLETE PERMANENT MAILING ADDRESS: _____
ZIP CODE

4. SEX (M/F): _____ 5. DATE OF BIRTH (mm/dd/yyyy): _____ 6. PLACE OF BIRTH (City/Municipality & Province): _____

7. CIVIL STATUS: Single Married Legally Separated Annulled Widowed Others, specify _____ 8. CITIZENSHIP: _____

9. TEL. NO.: _____ 10. CELLULAR PHONE NO.: _____ 11. E-MAIL ADDRESS: _____
(include area code)

12. EDUCATION (Highest Educational Attainment)
 Level of Education: Elementary High School College Master's Doctorate
 Completion: Graduated Not Graduated If not graduated, highest Grade/Year/Level/Units earned: _____
If graduated, date of Graduation/Completion (mm/dd/yyyy): _____ Honors received: _____
 Complete Title of Course/Degree (for college, master's, doctorate): _____ Major: _____
 Name & address of school attended: _____ Inclusive years: _____
(from-to)

13. EMPLOYMENT (Present & Previous):

Agency/Office	Address	Position/Job Title	Status of Appt./Employment	Inclusive Years <small>(from-to)</small>	Gov't Service? <small>(Yes/No)</small>
_____	_____	_____	_____	_____	_____

14. Information on the Veteran/Examination Taken
 Name of Veteran _____
Last name First name Ext. name Middle name Middle initial
 Date of birth (mm/dd/yyyy) _____ Place of birth (City/Mun. & Province) _____ Relationship to the veteran _____
 Title of examination to which VPR shall be applied _____ Rating _____
 Date of examination (mm/dd/yyyy) _____ Place of examination _____

15. Other Eligibility/ies: Title of Eligibility 1) _____ Date of Conferment (mm/dd/yyyy) _____
 2) _____

I declare under oath that I **personally** accomplished this Form, and that the information given are true, correct and complete statements pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I understand that any misrepresentation made in this document shall cause the disapproval of my application and/or outright revocation of the eligibility granted without prejudice to the filing of administrative/criminal case/s against me.

Done this _____ day of _____ 20____.

DO NOT FILL BELOW THIS LINE.

 Signature over full printed name of the applicant

Subscribed and sworn to before me this _____ day of _____ 20____.

 Signature over full printed name of Administering Officer

 Office/Position

INDORSEMENT (CSCFO to CSCRO or CSCRO to CSCCO; To be filled up ONLY as applicable):
 ENDORSING the application of _____ to CSCRO No. _____ /CSCCO as received by CSCFO- _____ /
 CSCRO No. _____ on _____, for approval and processing of the grant of VPR eligibility.

 Signature over full printed name of CSC Field/Regional Director / Date

ACTION TAKEN (for Processors only): Approved Disapproved due to _____ For Compliance

(Evaluation Fee) O.R. No.: _____ Date: _____ Amount: _____ Collecting Officer _____	(Processing Fee) O.R. No.: _____ Date: _____ Amount: _____ Collecting Officer _____	Title of Eligibility _____ Date of Effectivity (mm/dd/yyyy) _____ Certificate of Eligibility No. _____ Serial No. _____ Remarks _____ _____ Signature over full printed name of 1 st Processor/Date _____ Signature over full printed name of 2 nd Processor/Date _____
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APPLICATION RECEIPT

Received the application of _____
Last Name First Name Middle Name
 for grant of eligibility under special laws & CSC issuances at CSCRO/FO _____

 Signature over full printed name of Receiving Officer/Date

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I. QUALIFICATIONS FOR THE GRANT OF VPR ELIGIBILITY

A. Checklist of Qualifications

- 1. Applicant is qualified to avail of VPR as:
2. Title of failed examination to which the VPR shall be applied is covered by the VPR grant
3. Veteran is a World War II veteran as certified by the PVAO pursuant to the definition provided under CSC MC No. 8, s. 2006 for purposes of the VPR grant

B. Evaluation on Qualifications for the Grant of Eligibility

- Qualified (all qualifications set are met). Application for approval.
Not qualified. Application for disapproval. Specify qualification/s not met

II. DOCUMENTARY REQUIREMENTS FOR SUBMISSION (To be accomplished only for qualified applications; Put asterisk (*) for lacking items and/or "n/a" for items not applicable)

A. Checklist of GENERAL REQUIREMENTS:

- 1. Properly accomplished CS Form 101-B, Revised Dec. 2011 (all fields properly filled out, with "n/a" indicated in all fields not applicable to the applicant)
2. Three (3) pieces of identical, recent I.D. pictures with the following specifications:
3. Original and photocopy of any of the following I.D. cards, which must be valid (not expired) upon filing of application, and bears the applicant's name, picture and signature, and the issuing officer's name and signature
4. Original and photocopy of Birth Certificate of the applicant authenticated/issued by the NSO
5. For female married applicants, original and photocopy of Marriage Certificate authenticated/issued by the NSO
6. If filing of application is through a representative:

B. Checklist of SPECIFIC REQUIREMENTS: VPR Eligibility

- 7. Original and photocopy of Birth Certificate of the Veteran (NSO or LCR authenticated)
8. Original and photocopy of Marriage Contract of the Veteran (NSO or LCR authenticated)
9. Affidavit of Waiver to be executed by the Veteran only if still alive; or Joint Affidavit of Waiver by the veteran's surviving spouse and other children, if the veteran is deceased
10. Original and photocopy of Death Certificate of the veteran, if deceased
11. Original and photocopy of Marriage Contract of the Applicant (if the applicant is either the spouse or a female married child of the veteran)
12. Official Transcript of Record of the applicant (authenticated copy)
13. Original and Photocopy of the Report of Rating in the CS examination where the VPR shall be applied
14. Verification Slip of the applicant's examination result/rating issued by CSC-IRMO/CSC Regional Office concerned
15. Other Requirements:

C. Evaluation on Documentary Requirements Submitted

- Complete documents.
Incomplete/lacking documents. See items in the above checklist/s marked with asterisk (*) for compliance.
Incorrect documents. Specify deficiency/ies
Data on documents with discrepancy/ies.

Signature over full printed name of 1st Processor
Date Position

Signature over full printed name of 2nd Processor
Date Position

CERTIFICATION (To be accomplished only for qualified applicants with complete documents):

We certify that we have reviewed the qualifications and all the documentary requirements submitted by on his/her application for grant of the VPR eligibility, and found the same to be complete and in order.

Signature over full printed name of 1st Processor
Date Position

Signature over full printed name of 2nd Processor
Date Position

CERTIFICATION (To be accomplished only upon submission of ALL documents for compliance/requisites addressing deficiencies and/or discrepancies):

We certify that has submitted on the marked documents for compliance/requisites addressing marked deficiencies and/or discrepancies. We further certify to have reviewed the complied documents/requisites and found the same to be satisfactory and in order.

Signature over full printed name of 1st Processor
Date Position

Signature over full printed name of 2nd Processor
Date Position

CSC Regional Office No. may be reached at the following contact numbers:
Telephone :
Cellular :
Fax :
E-mail add :
Contact Person :

CSC Field Office may be reached at the following contact numbers:
Telephone :
Cellular :
Fax :
E-mail add :
Contact Person :