

Eligibility/Exam Records Request Form (ERRF) (Revised 01192011)	Republic of the Philippines CIVIL SERVICE COMMISSION OFFICE NAME REQUEST FOR ELIGIBILITY/EXAMINATION RECORDS	Date Accomplished by Client: _____ Time Accomplished by Client: _____ Time Received by ESD/ERS Personnel: _____ Initials of ESD/ERS Personnel: _____												
Certification of Eligibility (no/lost original certificate; attach Declaration)	Authentication of Eligibility (attach original certificate)	Others												
PERSONAL INFORMATION (Please print.)														
Name Used at the Time _____ of Issuance/Exam: Last Name First Name Middle Name		Gender: _____ Civil Status: _____												
Current Name: _____ Address Used at the Time of Issuance/Exam: _____ Current Address: _____		Presently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify: _____ Company: _____ Address: _____												
Date of Birth: _____ Place of Birth: _____														
Purpose/s of Request: <input type="checkbox"/> Employment <input type="checkbox"/> Replacement of Lost Certificate <input type="checkbox"/> Promotion <input type="checkbox"/> Replacement of Old/Torn/Worn-out Certificate		<input type="checkbox"/> Did Not Receive Original Certificate <input type="checkbox"/> Others _____												
ELIGIBILITY/EXAMINATION DATA (Please print.)														
Title of Eligibility/Exam: _____ Rating Obtained: _____ Date of Effectivity: _____														
Date of Issuance/Exam: _____ Registration/Certificate/Card/Resolution No.: _____														
Place of Issuance/Exam: _____ Registration/Certificate/Card/Resolution Date: _____														
Requested By: _____ Signature of the Eligible/Examinee _____ Contact No. _____ Signature at the Time of Issuance/Exam _____		Right Thumb Print _____ Authorized Representative (Printed Name & Signature) Contact No. _____												
ACTION TAKEN														
<input type="checkbox"/> CHECKED DATA AGAINST THE VCAS/CSEVS <input type="checkbox"/> CHECKED DATA AGAINST THE SPELS <input type="checkbox"/> CHECKED DATA AGAINST THE RROE/RLPFE <input type="checkbox"/> NO AVAILABLE RECORD		<input type="checkbox"/> PSP AVAILABLE THROUGH THE VCAS/CSEVS <input type="checkbox"/> NO PSP / PSP NOT AVAILABLE <input type="checkbox"/> CHECKED DATA AGAINST THE PSP REGIONAL FILE												
Book No. _____ Page No. _____ Seq./Line No. _____ School Code/Batch No. _____ Examinee/Reg. No. _____ Date Issued/Released: _____		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">In Order</th> <th style="text-align: center;">Not In Order</th> </tr> </thead> <tbody> <tr> <td>Photo/Picture</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Signature</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Date of Birth</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>		In Order	Not In Order	Photo/Picture	<input type="checkbox"/>	<input type="checkbox"/>	Signature	<input type="checkbox"/>	<input type="checkbox"/>	Date of Birth	<input type="checkbox"/>	<input type="checkbox"/>
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REMARKS _____ Name/Signature/Initials: _____ 1st Verifier: _____ Date: _____ 2nd Verifier: _____ Date: _____		REMARKS _____ 1st Validator: _____ Date: _____ 2nd Validator: _____ Date: _____												
RELEASE OF REQUEST/S														
Fee: _____ O.R. No.: _____ Date: _____ Action Officer _____		Released by _____ Received by _____ Signature of Eligible/Representative _____ Date: _____ Time: _____												

Note: We assure you that the information you provided will remain confidential as mandated under RA 10173 (Data Privacy Act of 2012)

A. CERTIFICATION OF ELIGIBILITY (for no/lost original certificate)

1. One piece 1" x 1" photo with printed name and signature affixed prior to having the picture taken
 - Printed married name (for married women); Format of name tag: First Name-Middle Initial-Last Name-Extension Name if any
 - Signature must be on top of the printed name.
 - Photo should have been taken within three (3) months prior to filing of request for Certification of Eligibility;
 - Scanned, computer-generated photo/name/signature will not be accepted;
2. Original and properly accomplished ERRF and Declaration Form (DF). DF should be handwritten and personally accomplished by the eligible.
3. Original copy of one (1) valid government issued ID Cards, or if the requesting party is abroad, please refer to additional requirements below;
4. Original and clear photocopy of Marriage Contract (for married women);
5. Certification fee: Php 100.00; and
6. If through a representative, please refer to additional requirements below.



B. AUTHENTICATION OF ELIGIBILITY

1. Original Certificate of Eligibility or Report of Rating;
2. Original and properly accomplished ERRF;
3. Original copies of one (1) valid government issued ID Cards of the eligible, or if the requesting party is abroad, please refer to additional requirements below;
4. Original and clear photocopy of Marriage Contract (for married women);
5. Authentication fee: Php 50.00 per copy; and
6. If through a representative, please refer to additional requirements below.

Choices for Government Issued ID Card/s:

- | | | | |
|------------------|---------------------|---------------------|------------------------------|
| 1. Office ID | 4. SSS/GSIS or UMID | 7. NBI Clearance | 10. Voter's ID/Certification |
| 2. Taxpayer's ID | 5. Driver's License | 8. Police Clearance | 11. PhilID |
| 3. Passport | 6. PRC License | 9. Postal ID | 12. Senior Citizen's ID |

ADDITIONAL REQUIREMENTS

A. If request for certification or authentication is filed through a Representative:

1. Authorization letter with hand-printed name and signature of authorized representative; and
2. Original copy of one (1) valid ID Card of the representative.

B. If the requesting party of the certification or authentication Works/Lives Abroad:

1. Clear photocopy of Passport; and } duly authenticated/validated by the Philippine Embassy or
2. Clear photocopy of one (1) valid ID Card. } Consular Office