



UNIVERSITY OF THE PHILIPPINES DILIMAN

APPLICATION FOR IDENTIFICATION CARD

Employee No.	Name of Employee (Last Name, Given Name, Middle Name)
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Person to Notify in Case of Emergency

Name : _____

Address : _____

Tel No. _____ Mobile No. _____

<p style="text-align: center;">Certification</p> <p>I hereby certify that the above mentioned data are correct</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Signature of Employee</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Date</p>	<p style="text-align: center;">Right Thumb Mark</p>	<p style="text-align: center;">Please Attached Recent Photograph Size (2" x2")</p> <p style="text-align: center;">Validating Officer will sign photograph at the bottom</p>
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THIS IS TO CERTIFY THAT THE ABOVE EMPLOYEE IS CURRENTLY CONNECTED WITH THE UNIVERSITY AS :

DESIGNATION : _____ COLLEGE/UNIT : _____

STATUS OF APPOINTMENT : PERMANENT TEMPORARY effective ___/___/20___ to ___/___/20___

CLASSIFICATION : FACULTY ADMINISTRATIVE REPS

ROSALINDA J. TINGCO
Chief, HRRD, HRDO