



Name:	Start Date:
Rank:	Group:

**PRE-EMPLOYMENT REQUIREMENTS CHECKLIST**

Please read the **Pre-Employment Requirements Guidelines**. Check all the documents submitted and sort by order of appearance.

Item	List of Pre-Employment Requirements	Scanned/ Soft Copy	Hard Copy
1	<input type="checkbox"/> Pre-Employment Requirements Checklist	X	✓
2	<input type="checkbox"/> 2x2 Pictures	✓	✓
3	<input type="checkbox"/> ID Request Form	✓	X
4	<input type="checkbox"/> PhilHealth Form with Applicable Attachments	X	✓
5	<input type="checkbox"/> Employee Data Form	✓	X
6	<input type="checkbox"/> Employment Contract	✓	✓
7	<input type="checkbox"/> Benefits Summary	✓	✓
8	<input type="checkbox"/> Resume	✓	✓
9	<input type="checkbox"/> Pre-Employment Medical Exam	✓	✓
10	<input type="checkbox"/> BSP Bio-Data – For Officers Only	✓	✓
11	<input type="checkbox"/> BSP Authorization Form – For Officers Only	✓	✓
12	<input type="checkbox"/> Employment Application Form	✓	✓
13	<input type="checkbox"/> Authority Conduct Background Investigation Form	✓	✓
14	<input type="checkbox"/> Transcript of Records or Copy of Grades	✓	✓
15	<input type="checkbox"/> Diploma or Certificate of Graduation	✓	✓
16	<input type="checkbox"/> Certificate of Clearance from ALL previous employer/s in the last 5 years	✓	✓
17	<input type="checkbox"/> Residence Sketch	✓	X
18	<input type="checkbox"/> Character References Form	✓	X
19	<input type="checkbox"/> NBI Clearance	✓	✓
20	<input type="checkbox"/> Proof of SSS Number	✓	✓
21	<input type="checkbox"/> Proof of Tax Identification Number	✓	✓
22	<input type="checkbox"/> Proof of Pag-IBIG Number	✓	✓
23	<input type="checkbox"/> Proof of PhilHealth Number	✓	✓
24	<input type="checkbox"/> Accountability Disclosure Form	✓	✓
25	<input type="checkbox"/> Employee Commitment Form	✓	✓
26	<input type="checkbox"/> Job Description	✓	✓
27	<input type="checkbox"/> BSP Fit and Proper Rule Form	X	✓
28	<input type="checkbox"/> BIR 2316 Undertaking Form	X	✓
29	<input type="checkbox"/> Full Business Disclosure Form	X	✓
30	<input type="checkbox"/> Data Privacy Notice and Consent Form	X	✓
31	<input type="checkbox"/> Birth Certificate of Employee	✓	✓
32	<input type="checkbox"/> Maxicare Form with Applicable Attachments	X	✓
33	<input type="checkbox"/> Latest BIR 2316 – Income Tax Return	✓	X

**COMMITMENT**

I have read and understood the Pre-Employment Requirements Guidelines. I commit to submit the lacking documents (if any) within 3 months after my start date. I understand that my appointment for regular status will be subject to completion of all pre-employment requirements including favorable medical, background and credit investigation results, and completion of all the required eLearnings. Lastly, I understand that non-completion/submission will delay my regularization and may be subject to disciplinary sanctions including termination.

\_\_\_\_\_  
SIGNATURE OVER PRINTED NAME\_\_\_\_\_  
DATE