



APPLICATION FOR AVAILMENT OF PROTECTIVE SECURITY PERSONNEL



(Please fill out form completely and legibly)

1. COMPLETE NAME

Last Name:

First Name:

Qualifier:

Middle Name:

2. PRESENT OR FORMER POSITION IN GOVERNMENT (Please check appropriate box below):

Cabinet Level Official/Department Secretary

Senator

Member of the House of Representatives

Associate Justice of Supreme Court

Presiding Justice, Sandiganbayan

Chairman/Chairperson of Constitutional Commission

Former Chief, PNP

3. COMPLETE MAILING ADDRESS:

House/Unit/Room/Building Number and Street:

Village/Subdivision:

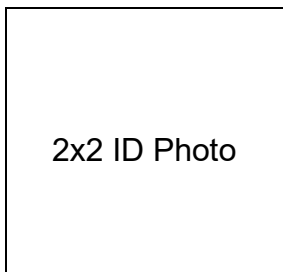
Barangay:

City/Municipality:

Province:

4. CONTACT NO.:

5. E-MAIL ADDRESS:



CERTIFICATION

I HEREBY CERTIFY THAT THE FOREGOING ARE TRUE AND CORRECT BASED ON MY PERSONAL KNOWLEDGE AND BELIEF.

Applicant's signature over printed name

SUBSCRIBED AND SWORN to before me this _____ day of _____, 2019 at _____, _____, Philippines.

Doc. No. _____
Page No. _____
Book No. _____
Series of 2019

NOTARY PUBLIC