

Republic of the Philippines
 Department of the Interior and Local government
 NATIONAL POLICE COMMISSION
NATIONAL HEADQUARTERS PHILIPPINE NATIONAL POLICE
 Camp Crame, Quezon City



POLICE PERSONAL FILE

PNP Badge No:
TIN:
Phil. Health No:

WARNING:

The correctness of all statements or entries made herein is subject to verification and any deliberate correction and distortion of information may give sufficient cause for **Investigation.**

Date Accomplished:

I. GENERAL INFORMATION			
1. NAME (Last Name	First Name	Middle Name	Qualifier)
2. RANK		3. UNIT/ STATION – NSU / PRO / NHQ	
4. HOME ADDRESS (House No / Street / Mun / City / Province)			
5. PLACE OF BIRTH:		6. DATE OF BIRTH:	
7. SEX:	8. CIVIL STATUS:	9. RELIGION:	
10. COLOR OF HAIR:	11. COLOR OF EYES	12. HEIGHT (CM)	13. WEIGHT (KG)
14. BLOOD TYPE :	15. BUILD:	16. COMPLEXION:	
17. LANGUAGES	18. IDENTIFYING MARKS	19. ETHNIC GROUP	
20. NAME OF <u>SPOUSE</u> OR NEAREST KIN/ADDRESS:		21. OCCUPATION:	
22. DEPENDENTS:			
NAME	DATE OF BIRTH	RELATIONSHIP	ADDRESS
23. HOUSING DATA:			
<input type="checkbox"/> OWN HOUSE & LOT <input type="checkbox"/> RENT HOUSE <input type="checkbox"/> OCCUPYING GOV'T QRTS <input type="checkbox"/> OWN HOUSE ONLY <input type="checkbox"/> RENT ROOM <input type="checkbox"/> OTHERS (Specify):			

Signature

II. APPOINTMENT AND EXPERIENCE/TIG DATA

EFFECTIVE DATE OF APPOINTMENT OF PREVIOUS RANK BY CSC STATUS DATE TEMPORARY: PERMANENT:	EFFECTIVE DATE OF PROMOTION OF PREVIOUS RANK PER PNP SO/GO STATUS DATE AUTHORITY TEMPORARY: PERMANENT:
EFFECTIVE DATE OF APPOINTMENT OF PRESENT RANK BY CSC STATUS DATE TEMPORARY: PERMANENT:	EFFECTIVE DATE OF PROMOTION OF PRESENT RANK PER PNP SO/GO STATUS DATE AUTHORITY TEMPORARY: PERMANENT:
IF PRESENT RANK PASSED TEMPORARY, STATE REASON [] Eligibility [] TIG [] Training [] Others _____	DATE SATISFIED THE DEFICIENCY: DEFICIENCY: _____ (specify) MONTH/YEAR: _____

FOR POLICE COMMISSIONED OFFICERS ONLY

SOURCE OF COMMISSION/ENTRY TO THE PNP

YEAR	YEAR
[] AFP Regular	[] AFP Reserve
[] SPO4-PINSP PROM _____	[] PMA _____
[] CIS	[] INP
[] NAPOLCOM	[] Lateral Entry: _____
	[] PNPA _____

III. EDUCATIONAL BACKGROUND

LEVEL	NAME OF SCHOOL	LOCATION	YEAR	DEGREE COMPLETED / UNITS	HONORS RECEIVED
COLLEGE					
POST GRADUATE					

IV. POLICE/MILITARY TRAINING CAREER COURSES

COURSE TAKEN	SCHOOL / LOCATION	INCLUSIVE - DATE	TRAINING HOUR	CLASS STANDING HONORS RECEIVED

Signature

V. NAPOLCOM/CIVIL SERVICE/PRC ELIGIBILITIES			
TITLE OF EXAMINATION	DATE TAKEN	WHERE TAKEN	RATING OBTAINED
VI. PERFORMANCE EVALUATION RATING (Immediately preceding two (2) semesters)			
RATING PERIOD	RATING	RATER	
VII. PHYSICAL FITNESS TEST RATING (Immediately preceding two (2) semesters)			
FITNESS PERIOD	RATING	CONDUCTED BY	
VIII. STATEMENT OF ASSETS & LIABILITIES, NETWORTH (Immediately preceding Three (3) Fiscal Years) <i>THIS WILL BE COMPARED TO THE SUBMITTED SALNs AND VERIFIED BY RMD, DPRM.</i>			
FISCAL YEAR	TOTAL ASSETS	TOTAL LIABILITIES	NET WORTH
IX. INDIVIDUAL INCOME TAX RECORDS (Immediately preceding Three (3) Fiscal Years)			
FISCAL YEAR	GROSS INCOME	TAXABLE INCOME	INCOME TAX PAID
X. OFFENSE DATA			
OFFENSE COMMITTED AS CHARGED (State whether Administrative or Criminal)	TYPE OF CHARGE (Principal or what)	STATUS / DISPOSITION (Exonerated, etc., - Penalty)	
XI. DATA ON PREVIOUS RETIREMENT/DISMISSAL/SUSPENSION			
Have you ever been retired, dismissed, forced to resign or suspended from any employment for reasons other than lack of funds?			
Have you ever been a candidate in a national or local election (including barangay election?)			
POSITION	PLACE	DATE	
XII. PHYSICAL AND MEDICAL RECORD			
DATE OF LAST PHY/MEDICAL EXAMTN -		WHERE TAKEN -	
DATE OF LAST DENTAL EXAMINATION -		WHERE TAKEN -	

Signature

DATE OF LAST NP EXAMINATION -	WHERE TAKEN -
DATE OF LAST DRUG TEST -	WHERE TAKEN -
DATE OF LAST PHY FITNESS TEST -	WHERE TAKEN -

XIII. POLICE/MILITARY MAJOR DESIGNATIONS
 (FOR PCOs: AS PLTN LDR, COP, BN/CPS/CPO/PPO/PRO/NSU STAFF, MG COMDR, CD/PD)

POSITION/DESIGNATION	UNIT	INCLUSIVE DATES

XIV. PROMOTION RECORDS

OLD RANK	NEW RANK	EFF DATE	PROM STATUS	AUTHORITY

XV. OTHER COURSES/TRAININGS/SEMINARS (IN PRESENT RANK)

COURSE TAKEN	SCHOOL / LOCATION	INCLUSIVE -DATE	TRAINING HOURS	CLASS STANDING HONORS RECEIVED

Signature

XVI. FIREARMS RECORD

LICENSE NO.	KIND	MAKE	CALIBER	AMMO	ISSUING UNIT

XVII. AWARDS AND RECOGNITIONS RECEIVED (IN PRESENT RANK)

INDIVIDUAL MEDALS/RIBBONS

NATURE OF AWARD	DATE AWARDED	AUTHORITY

INDIVIDUAL AND UNIT CITATION BADGE

INDIVIDUAL AND UNIT AWARDS/STREAMERS

LETTERS OF COMMENDATIONS/PLAQUES/CERTIFICATE OF

APPRECIATION/COMMENDATION/MERITS (NOT YET CONVERTED TO PNP MEDALS)

NATURE OF AWARD	DATE AWARDED	AWARDED BY

ACADEMIC AWARDS

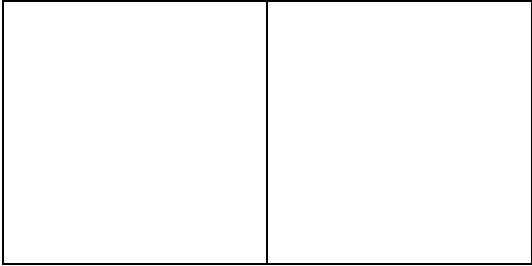
NATURE OF AWARDS	DATE	INSTITUTION

Signature

XVIII. CERTIFICATION

THIS IS TO CERTIFY that the answers given above are true and correct to the best of my knowledge and belief.

I COMMIT MYSELF TO BE LIABLE for perjury and/or dishonesty as result of any false, misrepresentation or omission in this Personal Data Sheet.



LEFT

RIGHT

THUMBMARK

Community Tax Certificate No:

Issued on:

Issued at :

SUBSCRIBED AND SWORN TO before me this _____ at _____, Philippines.

NHQ/NSU/PRO
Official Seal

* Not valid without Notarial Seal

Signature