

**NOMINATION FORM**

Attach here your latest 2”x 2” ID colored photo. It must be front, facial close-up, with your printed name & signature at the back of the photo.

**Instructions:**

1. Please read and follow instructions carefully.
2. Fill out all required information **COMPLETELY** and **LEGIBLY**.
3. We highly encourage the nominee to accomplish the **online nomination form** and have this printed and signed. *(The link is available at* [*www.mbfoundation.org.ph/outstanding-filipinos-forms*](http://www.mbfoundation.org.ph/outstanding-filipinos-forms) *or at the official Facebook page of Metrobank Foundation Outstanding Filipinos at @mbfi.outstandingfilipinos. You may also e-mail us at outstandingfilipinos.mbfi@gmail.com).*
4. Submit the **original accomplished nomination form with the nominator’s endorsement** personally or through courier addressed to OF Secretariat, Metrobank Foundation, 4/F Executive Offices, Metrobank Plaza, Sen. Gil Puyat Ave., Makati City 1200 **on or before January 18, 2019.**
5. Please scan or photocopy the accomplished nomination form and the endorsement.

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| **Award Joining in:** *(please check as appropriate)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **AWARD FOR TEACHERS**  ❏ Elementary (Kindergarten to Grade Six) ❏ Secondary (Grade Seven to Grade Twelve) ❏ Higher Education/Graduate School | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **AWARD FOR SOLDIERS**  A. ❏ Commissioned Officer ❏ Enlisted Personnel  B. ❏ Philippine Army ❏ Philippine Navy ❏ Philippine Air Force | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **AWARD FOR POLICE OFFICERS**  ❏ Police Senior Commissioned Officer ❏ Field Grade Police Commissioned Officer ❏ Police Non-Commissioned Officer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **PERSONAL INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Title First Name Middle Name Last Name Suffix *(Kindly include degrees attained)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Home Address: | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Residence No. Street Subdivision/Town/Barangay/District/ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| City/Municipality Province Zip Code Region | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of Birth:  *(mm/dd/yy)* | | | | | | | | |  | | | | | Age: | | | | | |  | | | | | | | Place of Birth: | | | | | | | |  | | | | | | | | | | | | | | | | | Religion: | | | | | | |  | | | | | | | | | | | | | | | | Nationality: | | | | | | | | | | | | | |  | | | | | | |
| Gender: | | | ❏ M ❏ F | | | | | | | | | | | Civil Status: | | | | | | | | ❏ Single ❏ Married ❏ Widow/Widower  ❏Legally Separated ❏ Legally Annulled | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Residence Phone No.: *(Area Code + Tel No.)* | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| Name of Spouse: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | No. of Children: | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Active Email Address: | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | Alternate Email: | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | Personal Mobile No.: | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
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| 1. **PROFESSIONAL INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PRC Lic. No. / AFP ID No. / PNP ID No.: | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | ID Validity: | | | | | | | |  | | | | | | | | | | | | | | | AFP / PNP Serial No.: | | | | | | | | | | |  | | | | | | | | | | | TIN No: | | | | | | | | | | | | | | | | | |  | | | | |
| Current Rank: | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | Designation: | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | |
| Date Entered Teaching/ Military/Police: | | | | | | | | | | | | | | | | | |  | | | | | | Total No. of Years in Profession: *(accumulated)* | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | Remaining Years in Service: *(Before retirement)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| Name of School /Unit /Station: | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | School ID: (For K-12) | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
| Complete School / Unit / Station Mailing Address: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| No./Street Sitio/Barangay/ District | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| City/Municipality Province Zip Code Region | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Office Phone No.:  *(Area Code + Tel. No.)* | | | | | | | | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | Office Fax No.:  *(Area Code + Tel. No.)* | | | | | | | | | | | | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | Office Email Address: | | | | | | | | | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | |
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| 1. **EDUCATIONAL BACKGROUND & ADVANCEMENT** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Kindly write your educational attainment and begin with the most recent. Please also include on-going studies.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| EDUCATION EARNED  (i.e. Doctoral, Masters, Bachelors, High School) | | | | | | | | | | | | | | MAJOR /  SPECIALIZATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | NAME & ADDRESS OF SCHOOL | | | | | | | | | | | | | | | | | | | | | | | | | | INCLUSIVE YEARS | | | | | | | | | | | | | | | ACADEMIC DISTINCTIONS | | | | | | | | | | |
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| 1. **PERFORMANCE EVALUATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Write your performance evaluation/rating obtained for the last ten (10) years. If you were on leave during any of the years below, use the years closest to the last 10 years or if you are on schooling, please indicate your performance in the school/unit of assignment/station.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Year/School Year** | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | |  | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | |  | | |
| **Numerical Rating** | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | |  | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | |  | | |
| **Descriptive Equivalent**  (e.g. O-Outstanding; VS-Very Satisfactory) | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | |  | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | |  | | |
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| 1. **COMPETITION RECORD** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Have you joined the Metrobank Foundation Outstanding Filipinos – (formerly SOT, TOPS, COPS) before? ❏ YES ❏ NO  If Yes, in what year/s? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Have you been a Finalist of the Metrobank Foundation Outstanding Filipinos (formerly SOT, TOPS, COPS) before? ❏ YES ❏ NO  If Yes, in what year/s? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **ENDORSEMENT *(to be filled out and signed by the nominator)*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| On a separate sheet of paper (1 page, long bond paper (8.5”x13”) with 0.6” margin on all sides, Arial font, size 12, and single spacing), please submit a description of the nominee written & signed by the nominator explaining why the she/he should receive the Metrobank Foundation Outstanding Filipinos Award. Please describe the nominee in terms of the following and cite specific examples:   * 1. character (personal qualities)   2. competence (professional skills, expertise and track record)   c. contribution to service and contribution to community involvement  (Please attach the nominator’s endorsement as Annex A to the duly accomplished nomination form upon submission.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **NOMINATOR’S CERTIFICATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| This is to certify that I voluntarily nominate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to the **Metrobank Foundation Outstanding Filipinos**. This nomination is a tribute to his/her track record of excellence in the teaching / military / police profession and to his/her exemplary dedication in his/her chosen field and ultimately contribute to nation building. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signed this day of | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | at | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | | | | | | | | | | | | | | Date (mm/dd/yy) | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | Place | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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|  | | | | | | | | | | | | | |  | | | | | | | | | | **Printed Name and Signature of Nominator** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Designation: | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | Organization: | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Complete Address: | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Building / No. Street District/Town/Barangay | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| City/Municipality Province Zip Code Region | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Office Phone No.:  *(Area Code + Tel. No.)* | | | | | | | | | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | Personal Mobile No. | | | | | | | | | | | | | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | Personal Email Address: | | | | | | | | | | | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | |
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| 1. **NOMINEE’S CERTIFICATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| This is to certify that I voluntarily submit myself to the rules of the Metrobank Foundation Outstanding Filipinos. **I agree to accomplish the nomination form online and provide the complete supporting documents should I qualify for the next phase of the Award.** I also certify that I am physically and mentally fit to undergo the evaluation process of the search.  Further, I authorize the organizers or their designated agent/s to validate the information, records, documents that I shall submit in relation to the nomination and to use these in related activities. In this regard, I hereby exempt, discharge, release and free Metrobank, the Metrobank Foundation, Inc., their respective directors/trustees, officers, employees, members and staff, affiliates and/or subsidiaries, and the judges of the search, from any claim or liability arising from my participation in the search.  I hereby certify to the best of my knowledge and belief that all the information contained in this form is true and correct. I am aware that any willful misrepresentation or misdeclaration of facts or any untruthful statement or information stated herein shall be used as basis for my disqualification or the withdrawal of any award slot.  I hereby commit that should I win the Award, I will continue to render service in the Philippines for at least three (3) years.  Under the Data Privacy Act of 2012 (R.A. 10173) and as a nominee in the Metrobank Foundation Outstanding Filipinos (OF), I allow the Metrobank Foundation, Inc. (MBFI) to collect and use my personal information such as name, address, occupation, family background, contact details, etc. for administrative and documentation purposes in the course of my participation in the OF. I acknowledge that I may revoke this authorization any time by notifying MBFI in writing and all personal information collected will be stored in a secure location; retained in accordance with our retention policies; and only authorized MBFI employees will have access to them.  I understand that if I think that my personal data was mishandled in terms of confidentiality or integrity, or if someone tampered with my personal data without my consent, I may contact the MBFI Data Protection Officer through telephone number (63 2) 857 0679/Fax: (63 2) 818 5656, or email at [mbfi.dataprotection@metrobank.com.ph](mailto:mbfi.dataprotection@metrobank.com.ph). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signed this day of | | | | | | | | | | | | | |  | | | | | | | | | | | | | | at | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | | | | | | | | | | | | | | Date(mm/dd/yy) | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | Place | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | | | | | | | | | | | | | |  | | | | | | | | | | **Printed Name and Signature of Nominee** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **CRIMINAL, CIVIL & ADMINISTRATIVE RECORD** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Have you been **CHARGED** with any of the following offenses at any time before you joined and/or during active in service?  \_\_\_\_ YES \_\_\_\_ NO; ❏ Administrative ❏ Civil ❏ Criminal  Status: ❏ Case Dismissed ❏ Pending | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Have you been **CONVICTED** of any of the following offenses at any time before you joined and/or during active in service?  \_\_\_\_ YES \_\_\_\_ NO; ❏ Administrative ❏ Civil ❏ Criminal  Status: ❏ Case Dismissed ❏ Pending | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **CHARACTER REFERENCES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please list down three (3) names of references that are NOT directly related to the nominee by consanguinity or affinity. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME | | | | | | | | | | | | | | | | | | POSITION/  ORGANIZATION | | | | | | | | | | | | | | | | | | ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | MOBILE NUMBER | | | | | | | | | | | | | | | | | EMAIL ADDRESS | | | | | | | | | | | | | | | | |
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| 1. **ADDITIONAL PROFESSIONAL INFORMATION (FOR TEACHERS ONLY)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Status of Appointment: | | | | | | ❏ Full time ❏ Part time | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Tenure: | | | | | | | | ❏ Permanent/Regular  ❏ Temporary/Substitute/ Contractual/Volunteer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Field of Specialization: | | | | |  | | | | | | | | | Subject Currently Handling: | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | Grade/Year Level  Currently Handling: | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| **Your School/Institution’s Definition of Full Load**  *(in no. of hrs./week)***:** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | **Your TOTAL LOAD for the school year** *(in no. of hrs./week)***:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Please write the breakdown of your load for the school year below:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **LOAD** | | | | | | | | | | Teaching  (in no. of hrs. / week) | | | | | | | | | | | | | | | | | | | | | | Administrative Work  (in no. of hrs. / week) | | | | | | | | | | | | | | | | | | | | | Research  (in no. of hrs. / week) | | | | | | | | | | | | | | | | | | | | | | | Others (Pls. specify) | | | | | | | | | | | | | | | | | | | |
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