



**INSTRUCTIONS:**

1. Fill-out all information **COMPLETELY** and **LEGIBLY**. PRINT and SIGN the original accomplished nomination form in legal-sized bond paper (8.5 x 13). Scan and save as PDF.
2. Secure the **nominator's endorsement** (See Part VI of the nomination form for the details). Scan and save as PDF.
3. Download the template of the **Affidavit of Undertaking** at <http://bit.ly/AffidavitUndertaking> and have it notarized. Scan and save as PDF.
4. Email the scanned copies of the **accomplished nomination form, signed nominator's endorsement and notarized Affidavit of Undertaking** by **NOVEMBER 30, 2021** to [outstandingfilipinos.mbf@gmail.com](mailto:outstandingfilipinos.mbf@gmail.com) with the subject line 2022OF

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.

**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

**I. 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/

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.: \_\_\_\_\_

**II. PROFESSIONAL INFORMATION**

PRC Lic. No. / AFP ID \_\_\_\_\_ ID \_\_\_\_\_ AFP / PNP  
 No. / PNP ID No.: \_\_\_\_\_ Validity: \_\_\_\_\_ Serial No.: \_\_\_\_\_ TIN No: \_\_\_\_\_

Current Rank/Position: \_\_\_\_\_ Field of Specialization: \_\_\_\_\_ 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

City/Municipality                      Province                      Zip Code                      Region

Office Phone No.: (Area Code + Tel. No.) \_\_\_\_\_ Office Fax No.: (Area Code + Tel. No.) \_\_\_\_\_ Office Email Address: \_\_\_\_\_

**WRITE US:** Metrobank Foundation Outstanding Filipinos Secretariat, 10<sup>th</sup> Floor, Metrobank Plaza Annex, Sen. Gil Puyat Ave., Makati City 1200  
**EMAIL US:** [outstandingfilipinos.mbf@gmail.com](mailto:outstandingfilipinos.mbf@gmail.com)  
**CALL US:** Direct line: (02) 898-8757; Mobile Number: Teachers - (0919)0628128; Police Officers – (0926)7080276 ; Soldiers – (0919)0628127

### III. 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

### IV. 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)										

### V. 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? \_\_\_\_\_

### VI. ENDORSEMENT (to be filled out and signed by the nominator)

On a separate sheet of paper (ONE page, legal-sized 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 **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:

- character (personal qualities)
- competence (professional skills, expertise and track record)
- contribution to service and contribution to community involvement

*(Please attach the nominator's endorsement to the duly accomplished nomination form upon submission.)*

### VII. 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

\_\_\_\_\_  
Printed Name and Signature of Nominator

Designation: \_\_\_\_\_ Organization: \_\_\_\_\_

Complete Address: \_\_\_\_\_  
Name of Building / No. Street District/Town/Barangay

City/Municipality Province Zip Code Region

Office Phone No.: \_\_\_\_\_ Personal Email Address: \_\_\_\_\_  
(Area Code + Tel. No.) Personal Mobile No. \_\_\_\_\_

<b>WRITE US:</b>	Metrobank Foundation Outstanding Filipinos Secretariat, 10 <sup>th</sup> Floor, Metrobank Plaza Annex, Sen. Gil Puyat Ave., Makati City 1200
<b>EMAIL US:</b>	<a href="mailto:outstandingfilipinos.mbf@gmail.com">outstandingfilipinos.mbf@gmail.com</a>
<b>CALL US:</b>	Direct line: (02) 898-8757; Mobile Number: Teachers - (0919)0628128; Police Officers - (0926)7080276 ; Soldiers - (0919)0628127

## VIII. 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

## IX. 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

## X. 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
1.				
2.				
3.				

## XI. ADDITIONAL PROFESSIONAL INFORMATION (FOR TEACHERS ONLY)

Status of Appointment:  Full time  Part time Tenure:  Permanent/Regular  Temporary/Substitute/ Contractual/Volunteer

Main Subject Currently Handling (*Write one only*): \_\_\_\_\_ Main Grade/Year Level Currently Handling: \_\_\_\_\_

Your School/Institution's Definition of Full Load (*in no. of hrs./week*): \_\_\_\_\_ Your TOTAL LOAD for the CURRENT school year (*in no. of hrs./week*): \_\_\_\_\_

**Please write the BREAKDOWN of your total load for the CURRENT 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)

\_\_\_\_\_  
Name and Signature of School Head/ Person-in-Charge of Teachers' Schedule

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