



Republic of the Philippines
CITY GOVERNMENT OF MEYCAUAYAN
 City of Meycauayan, Bulacan

CITY OF MEYCAUAYAN TEACHERS' PROFESSIONALIZATION PROGRAM

APPLICATION FORM

(To be submitted with required documents)

Passport Size
 ID Photo

(With Last Name,
 First Name, MI)

Instructions: Please write legibly in ALL CAPITALS LETTERS using BLACK BALLPEN.

<input type="checkbox"/> Dep Ed	<input type="checkbox"/> PCCM	Application No.	
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Criteria

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| <ol style="list-style-type: none"> 1. Age must be from 25 to 50 years old 2. Resident of the City of Meycauayan for at least 2 years 3. Appointment Status: <ol style="list-style-type: none"> a. Permanent in any public school in the City of Meycauayan b. Permanent, Temporary or under Contract of Service in PCCM 4. With at least 2 years of continuous service at DepEd / PCCM 5. Has good academic record with GWA not lower than 2.50, or its equivalent | <ol style="list-style-type: none"> 6. Has not earned any units in Master's Degree or finished any Master's Degree 7. Has no other scholarship at the time of application 8. Has no pending / filed administrative / civil case in any court / hearings 9. Has no immediate family that is presently a beneficiary of the Teachers' Professionalization Program |
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Documentary Requirements

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| <ol style="list-style-type: none"> 1. Notarized Application Form - 1 original copy & 6 photocopies 2. Passport Size ID Photo (with Last Name, First Name, Middle Initial) to be attached to this application - 1 photo 3. Letter of Intent addressed to the City Mayor:
 ATTY. HENRY R. VILLARICA
 City Mayor
 City of Meycauayan, Bulacan
 - 1 originally signed copy & 6 photocopies 4. Recommendation Letter from Faculty President or School Head - 1 originally signed copy & 6 photocopies 5. Residence Certificate showing the number of years of residency - 1 original sealed copy & 6 photocopies | <ol style="list-style-type: none"> 6. Service Record - 1 original copy & 6 photocopies 7. Certified copy of IPCR / Performance Rating for the last two (2) rating periods prior to application - 1 original & 6 photocopies 8. Certified true copy of a Bachelor's Degree Transcript of Records (TOR) - 1 original copy & 6 photocopies 9. Undergraduate Thesis Front Cover - 7 photocopies showing the title / author 10. Published Educational Articles/Journal/Books - 7 photocopies showing the name of publication / journal / title / author 11. Seminar / Training Speakership Certificate - 7 photocopies 12. Awards / Recognition Certificate or Photos - 7 photocopies |
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PERSONAL INFORMATION

Name (Last, First, Middle)					
Birthdate (mm/dd/yyyy)	Age	Sex	Civil Status		
Present Address					
Years of Residency in Meycauayan	Email Address			Mobile No.	

EMPLOYMENT BACKGROUND

Position Title	Employer				
Status of Appointment	No. of Years in Service	Telephone No.			
Employment Address				Performance Rating	2nd
				1st	

HIGHEST EDUCATIONAL ATTAINMENT

Course		Gen. Weighted Ave. (GWA)	
Name and Address of School Last Attended			
Undergraduate Thesis Title	Published?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

PUBLISHED EDUCATIONAL ARTICLES / JOURNAL / BOOKS					
Educational Article Title				Published in	
Journal Title				Published in	
Book Title				Published in	
SEMINAR / TRAINING SPEAKERSHIP					
Seminar / Training Title					
Conducted / Sponsored by		Place		Date	
EMPLOYEE AWARDS / ACADEMIC RECOGNITION RECEIVED					
Awards (Leadership, Best Teacher, Behaviour & Value, Service & Tenure, other awards)					
Academic Recognition (Graduation honors, competitions/contests, scholarships, dean's lister, national recognition, etc.)					
MASTER'S DEGREE PROGRAM INTENDED TO ENROLL					
Field of Specialization					
Degree Program					
<i>(Continue on separate sheet if necessary)</i>					

I hereby certify that the information given herein and in the accompanying documents are true and correct and that:

1. I am a resident of the City of Meycauayan for at least two (2) years;
2. I have not earned any units in Master's Degree or finished any Master's Degree;
3. I have no other or pending scholarship at the time of this application;
4. I have no pending / filed administrative / civil case in any court / hearing; and
5. I have no immediate family that is presently a beneficiary of the Teachers' Professionalization Program

I understand that the grant or continuation of my scholarship under the City of Meycauayan Teachers' Professionalization Program is subject to the information given hereunder. As such, I am authorizing the City Government of Meycauayan to check and verify the truthfulness and veracity thereof, including the genuineness of the documents submitted herewith.

I also understand that I shall be civilly and criminally prosecuted and shall be blacklisted from any and all programs and benefits that the City of Meycauayan will have in the future for any false information or any form of misrepresentation I have made in this scholarship application.

Signature over Printed Name of Applicant

Date Signed

SUBSCRIBED AND SWORN to before me this _____, hereat
_____, affiant exhibiting to me the below-stated government issued
identification card and community tax certificate.

Government Issued ID:	
ID No.:	Date Issued:
Community Tax Certificate No.:	Issued on:
Issued at:	

NOTARY PUBLIC