

PERSONAL HISTORY STATEMENT

I. PERSONAL DATA

- A. Name _____
(Last) (First) (Middle)
- B. Rank _____ AFPSN _____ BRSVC _____
- C. Present Unit Assignment/Office _____
Present Job Title/Designation/Position _____
- D. Business/Office/Duty Address _____
- E. Home Address _____
(Include Street and District)
- F. Date of Birth _____ Place of Birth _____
- G. Change in Name (If court action, give details) _____
- H. Nicknames _____
National Registry Number _____ TIN _____ GSIS/SSS Policy No _____
Religion _____ Blood Type _____

II. PERSONAL CHARACTERISTICS

- A. Description Sex _____ Age _____ Height (in meters) _____
Weight (in kg) _____ Built (Heavy/Medium/Light) _____
Complexion (Dark/Fair/Light) _____ Color of Eyes _____
Color of Hair _____ Scars, marks or other distinguishing features _____
- B. Physical Condition/Present State of Health (Excellent/Good/Poor) _____
Physical/Mental Defects _____
Recent Serious Illness _____

III. MARITAL HISTORY

- A. Civil Status (Single/Married/Separated/Widower) _____
- B. Name of Spouse (Full Name) _____ Date of Marriage _____
Spouse Date of Birth _____ Spouse Place of Birth _____
Occupation and Place of Employment _____
Citizenship _____ If naturalized, site date and place where naturalized _____

- C. Children (Use separate sheet for additional information)

Name	Date of Birth	Address
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

IV. FAMILY HISTORY AND INFORMATION

- A. Name of Father (Full Name) _____
Date of Birth _____ Place of Birth _____
Home Address _____
Occupation and Place of Employment _____
Citizenship _____ If naturalized, site date and place where naturalized _____

B. Name of Mother (Full Name) _____
 Date of Birth _____ Place of Birth _____
 Home Address _____
 Occupation and Place of Employment _____
 Citizenship _____ If naturalized, site date and place where naturalized _____

C. Brothers and Sisters (Use separate sheet for additional information)

Name	Date of Birth	Address
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

D. Name of Step Parent or Guardian (Full Name) _____
 Date of Birth _____ Place of Birth _____
 Home Address _____
 Occupation and Place of Employment _____

E. Father-in-Law (Full Name) _____
 Date of Birth _____ Place of Birth _____
 Home Address _____
 Occupation and Place of Employment _____

F. Mother-in-Law (Full Name) _____
 Date of Birth _____ Place of Birth _____
 Home Address _____
 Occupation and Place of Employment _____

G. Brothers and Sisters (Use separate sheet for additional information)

Name	Date of Birth	Address
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

V. EDUCATIONAL BACKGROUND

A. Elementary

School	Location	Inclusive dates of attendance
_____	_____	_____
_____	_____	_____
_____	_____	_____

B. High School

School	Location	Inclusive dates of attendance
_____	_____	_____
_____	_____	_____
_____	_____	_____

C. College

School	Location	Course and Year Graduated
_____	_____	_____
_____	_____	_____
_____	_____	_____

D. Post Graduate

School	Location	Course and Year Graduated
_____	_____	_____
_____	_____	_____
_____	_____	_____

E. Other Schools Attended

School	Location	Course and Year Graduated
_____	_____	_____
_____	_____	_____
_____	_____	_____

VI. MILITARY HISTORY

- A. Date Entered /CS _____ Date Enlisted _____
- B. Date of Commission _____ Source of Commission _____
- C. Date of CAD _____
- D. Have you ever been separated from the military service, If yes, state nature and circumstances _____

E. Important Unit Assignments (Use separate sheet for additional information)

Designation	Unit	Inclusive dates
_____	_____	_____
_____	_____	_____
_____	_____	_____

F. Military Schools Attended (Use separate sheet for additional information)

Course	Name and Location	Inclusive dates of attendance
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

G. Awards/Commendations/Decorations received (Use separate sheet for additional information)

Awards/Commendations/Decorations	Authority
_____	_____
_____	_____
_____	_____
_____	_____

VII. PLACES AND RESIDENCE SINCE BIRTH

(Use separate sheet for additional information)

Complete Address	Inclusive Dates
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

VIII. EMPLOYMENT HISTORY

(Use separate sheet for additional information)

Office/Location	Position	Inclusive Dates	Reason for Leaving
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

XI. ORGANIZATIONS

List of organizations or social groups which you have been a member of

Name of Organization	Position Held	Inclusive Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

XII. MISCELLANEOUS

A. Hobbies, Sports and Pastime

B. Skills (such as Driving, Carpentry, Shorthand, Typing, Designing)

C. Language and Dialects (Indicate ability as Poor, Fair or Fluent)

Language/Dialect	Speak	Read	Write
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

D. Are you willing to undergo periodic lie detection test? Yes _____ No _____

E. Copy exactly the following paragraph in your own handwriting

As Luis Repasa III of 105th Xavier Avenue, guzzled his way through three bottles of brandy, Josephine Z. Quinsing, a partner in the law firm of San Diego and Ballesteros located at 2678 Valley Forge St., Quezon City turned to Richard Ting Sr., a Chinese food expert from O.W. Ewaman Company Ltd., 346 Hadji Jairul Hussein Blvd., and said, "I can't speak for my government, but I am quite sure your country and mine get together for closer understanding.

I CERTIFY that the foregoing answers are true and correct to the best of my knowledge and belief and I agree that any misstatement or commission as to material fact will constitute ground for immediate denial of my application for clearance.

Signed at _____ Date _____ Signature _____

WITNESSES

(Signature over printed name)

(Signature over printed name)

ABC Form 1

PERSONAL IDENTIFICATION M.R. Coll. No. _____

Name _____ Photo Number _____

Aliases _____ Classification _____

Color of Eyes _____ Sex _____ Reference Classification _____

Classified by _____ Verified by _____

RIGHT HAND

THUMB	INDEX FINGER	MIDDLE FINGER	RING FINGER	LITTLE FINGER

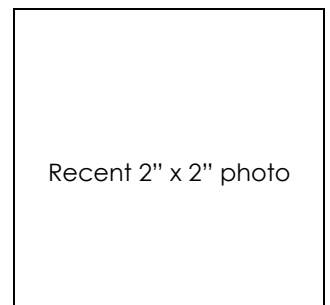
LEFT HAND

THUMB	INDEX FINGER	MIDDLE FINGER	RING FINGER	LITTLE FINGER

Impression taken by _____ Signature _____ Subject _____

LEFT HAND		RIGHT HAND	
Four fingers taken simultaneously	Thumb	Thumb	Four fingers taken simultaneously

LEFT THUMB	RIGHT THUMB



SUBSCRIBE AND SWORN to before me this ____ day of _____, _____ at _____, Philippines, affiant exhibit to me his/her Residence Certificate Number _____ issued on _____ at _____.

Administering Officer/Notary Public

Rank/Designation/Position

TAN/TIN

SKETCH OF YOUR PRESENT ADDRESS

A large, empty rectangular box with a thin black border, intended for a hand-drawn sketch of the respondent's current address. The box occupies most of the page's vertical space.