



HUMAN RESOURCE MANAGEMENT DEPARTMENT

Bldg. 255, Barryman Rd., Subic Bay Freeport Zone Philippines
(6347) 252-4232/4711/4110/4135/4252/4054/4297
Fax: (6347) 252-4294

SUBIC BAY
METROPOLITAN AUTHORITY

- Request for:
- | | |
|--|--|
| <input type="checkbox"/> Service Record | <input type="checkbox"/> Certification of Employment |
| <input type="checkbox"/> Appointment Copy | <input type="checkbox"/> Certificate of Employment with Compensation |
| <input type="checkbox"/> Others (Pls. specify) | <input type="checkbox"/> Certification of No Pending Case |

Date Requested: _____

Name: _____

Date of Birth: _____ (Do not leave this blank)

Present Home Address: _____

Telephone No.: _____ Cellphone No.: _____

EMPLOYMENT STATUS:

- SBMA Plantilla
 SBMA Government Contractual
 SBMA Casual
 SBMA Contract of Services
 Others (Pls.specify): _____

Date of Assumption/Hired: _____ Date of Separation: _____

Department: _____ Position/SG: _____

Purpose: _____

Signature of Requestor

SBMA Human Resource Management Department

COE Claim Stub _____

Name of Claimant: _____ Requestor's Name: _____

Note: Date of claiming should be at least three (3) working days from the date requested.

The requestor or claimant shall present this stub upon claiming the certificate.

In case the claimant is not the requestor, the stub should be signed by the requestor as his/her authorization to pick-up his COE.



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