 Republic of the Philippines

E A S T E R N V I S AY A S S T A T E U N I V E R S I T Y

Tacloban City

**APPLICATION/NOMINATION FORM FOR THE EVSU-BOR**

**PRIVATE SECTOR REPRESENTATIVE**

|  |
| --- |
| 1. **Personal Information**
 |
|   First Name Middle Name Last Name |
| 1. **Position/Affiliation**
 |
| 1. **Present Position -**
2. **Socio-Civic Involvement:**

*(Attach an e-copy of any proof of involvement.)*

|  |  |  |
| --- | --- | --- |
| **Name of the Organization/Association** | **Nature of Involvement**(*Please describe briefly.*) | **Inclusive Dates of Involvement**(MM/DD/YYYY) |
| From | To |
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1. **Membership/Affiliation in Professional Organizations and Honor Societies:**

*(Attach an e-copy of the certificate/s)*

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| --- | --- | --- |
| **Name of Organization/Association** | **Nature of Membership/Affiliation)**(*Please indicate if member, officer, consultant/adviser*) | **Inclusive Dates**(MM/DD/YYYY) |
| From | To |
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| 1. **Career and Education**
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| 1. **Employment History:**

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| --- | --- | --- |
| **Name & Address of Employer** | **Position Title and Brief** **Position Description** | **Period of employment**(MM/DD/YYYY) |
| From | To |
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1. **Highest Educational Attainment:**

*(Attach a machine copy of diploma/Transcript of Records)*

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| --- | --- | --- | --- |
| **Name of School & Address***(Write in full)* | **Degree Earned***(Write in full)* | **Year Completed** | **Scholarship/Awards Received** |
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| 1. **Awards and Recognitions**
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| *(Attach an e-copy of the certificate/plaque/resolution)*

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| --- | --- | --- |
| **Title of Award/Recognition** | **Brief Description of Award/Recognition** | **Sponsoring Agency/Organization** *(Indicate also if local, regional, national or international)* |
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| 1. **Partnership/Linkages**
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| --- | --- |
| **Name & Address of Company/Institution** | **Nature of Partnership/Linkage**(*Please describe*) |
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| 1. **Vision and Commitment**

(In the first paragraph, articulate what you intend to achieve in your 2-year stint as a Private Sector Representative. In the second paragraph, express your words of commitment to the EVSU Board of Regents in particular, and the EVSU community in general.)*Note: Provide additional sheets, if necessary.*  |
|  |
| 1. **Risk Management Experience** *(Please narrate and/or enumerate.)*
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|  |
| 1. **Other Personal Information**
 |
| 1. Complete Permanent Address *(attach a photocopy of the Voter’s Certificate or Voter Registration Record or Voter’s ID, or any proof of billing)*
2. Birth Date *(attach the PSA-issued Certificate of Live Birth)*

 Month Day Year1. Birth Place:
2. Nationality:
3. Marital Status:
4. Contact Number:
* Mobile No.:
* Telephone No. (Office):
* Telephone No. (Residence):
* Email Address/es:
 |
| 1. **Applicant’s Name/Nominating Organization/Person:**
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Signature over Printed Name Date of Applicant/Duly Authorized Representative of  the Nominating Organization) |
| 1. **Conforme (*if nominated*):**
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Nominee’s Signature over Printed Name) Date |

REPUBLIC OF THE PHILIPPINES

CITY/MUNICIPALITY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) SS.

 SUBSCRIBED AND SWORN to before me, this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_ 2023 at \_\_\_\_\_\_\_\_\_\_\_\_\_, Philippines.

Doc. No. \_\_\_\_\_;

Page No. \_\_\_\_\_;

Book No.\_\_\_\_\_;

Series of 2023