



REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF LABOR AND EMPLOYMENT
 REGIONAL OFFICE NO. _____
PUBLIC EMPLOYMENT SERVICE OFFICE



SPECIAL PROGRAM FOR EMPLOYMENT OF STUDENTS (SPES)
 (RA 7323, as amended by RAs 9547 and 10917)

PLACEMENT REPORT CUM GSIS INSURANCE COVERAGE

Name of Establishment/Employer: _____
 Address: _____
 Business Activity: _____ Industry Code: _____

Number of Vacancies: _____
 Contact Person: _____
 Tel. No. _____

SPES BENEFICIARY <i>(LAST NAME, FIRST NAME, M.I.)</i>	ID No.	Age	Sex	Address	Contact No.	Student/ OSY/ Dependent of Displaced Worker	Educational Level	New/ SPES Baby	Occupational Code & Position	Wage Rate per Day	Employment Period	Total Amount to be earned/ received as salary/ wages	GSIS Policy No.	GSIS Beneficiary

Note: This form shall be accomplished by the Public Employment Service Office to be submitted to the DOLE Regional Office at least ten (10) days prior to the date of employment.

Prepared by:

Submitted by:

 Name, Designation and Signature

 Signature of PESO Manager

 Date

 Date