

Republic of the Philippines Department of the Interior and Local Government BUREAU OF FIRE PROTECTION



APPLICANT'S INITIAL EVALUATION FORM

| o be accomplished | by the APPLICAN | NT | | | | | | |
|---|--|------------------------|------------|----------|--------------------------------|----------------------|------------------|------------|
| | | | | | Applying For: | | | |
| Date | | | | | L | | | |
| Name | | | | | | <u>BFP</u> | Position | |
| Home Address | | | | | | BFP PI | lace of Position | <u> </u> |
| Date of Birth | | | Ag | ge | Sex | (| | |
| Contact No | | | | | Sign | ature | | |
| | | | | | | EENING | | |
| o be accomplished | d by the HEALTH S | For Uniforme SERVICE S | | nnel App | licants Only | Date: | | |
| Height (ft) | Weig | ht (kg) | | | | Date | | |
| Blood Pressure | Heart Rate | | Height | □0 | ver Weight | ☐ Qualified | ☐ Disqualified | |
| | | ☐ Other/: | _ | _ | | | • | |
| | | Weigh | nt: ± 5kք | g BMI | Female: 5'0' ; HR: 80 - 100 |) | | |
| Health Service Sta | ff | | | | Signature/ | Date | | |
| To be accomplished | d by the Adminis | | | T SC | REENING | | | |
| Education | | | | Eligib | ility | | | |
| Relevant Years | of Experience | | | Relev | ant Hours | of Training | | |
| Lacking Requirer | nents: | | | | | | | |
| □ Application Letter □ Authenticated □ Clearance/s: □ □ Authenticated □ PSA Birth Certificate □ Authenticated | | | ticated | • | | | S | |
| | npliance on or befo reau of Fire Protec | | | , n | on-compliar | nce of the said docu | ument/s would w | aive my ap |
| Name of Applican | nt | | | | Signature/ | Date | | |
| Remarks: | ified 🔲 Disc | qualified | □W | ith Con | npliance [| _ Other/s:_ | | |
| | | | | | | | | |

Applicants shall have a copy of the Applicant's Evaluation Forms as their receipt of their application in the BFP