



# PHILIPPINE AMUSEMENT AND GAMING CORPORATION

A Global Corporation with a Global Mindset and a Filipino Heart

GEL Form 2

## GAMING EMPLOYMENT LICENSE APPLICATION FORM

BINGO

E-GAMES

### GENERAL INSTRUCTIONS

- ✦ Print Legibly. ✦ Mark appropriate boxes with "x".
- ✦ Don't leave any spaces blank. Indicate N/A for ALL spaces that are Not Applicable.
- ✦ Use separate sheet for all information that cannot be accommodated in the spaces provided for.

Do not fill up. PAGCOR use only:

G.E.L. No. \_\_\_\_\_ Date Approved: \_\_/\_\_/\_\_

O.R. No. \_\_\_\_\_ O.R. Date: \_\_/\_\_/\_\_

### LICENSE TYPES AND FEES

Class A - Managerial (P 1,000.00)

Class B - Supervisory (P 500.00)

Class C - Rank and File (P 300.00)

POSITION APPLIED FOR: \_\_\_\_\_ CURRENT EMPLOYER: \_\_\_\_\_

### PERSONAL INFORMATION

<b>COMPLETE NAME</b>	_____, _____, _____ <small>SURNAME, FIRST NAME MIDDLE NAME</small>					
<b>PRESENT ADDRESS</b>	NO.	STREET	BRGY./VILLAGE	TOWN/MUNICIPALITY	PROVINCE	ZIP CODE
<b>PERMANENT ADDRESS</b> <small>(This will appear on the License)</small>	NO.	STREET	BRGY./VILLAGE	TOWN/MUNICIPALITY	PROVINCE	ZIP CODE
<b>DATE OF BIRTH</b> _____	<b>SEX</b> <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	<b>CIVIL STATUS</b> <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> OTHERS (Please Specify) _____				
<b>PLACE OF BIRTH</b> _____	<b>MOBILE No.</b> _____		<b>LANDLINE No.</b> _____	<b>BLOOD TYPE</b> _____		
<b>CITIZENSHIP</b> _____	<b>ACR No.</b> <small>(If Alien)</small> _____	<b>HEIGHT (m)</b> _____	<b>WEIGHT (kg)</b> _____	<b>PAG-IBIG No.</b> _____		
<b>TIN</b> _____	<b>SSS/GSIS No.</b> _____		<b>PHILHEALTH No.</b> _____			

### FAMILY BACKGROUND

**SPOUSE'S COMPLETE NAME:** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  Deceased  
SURNAME, FIRST NAME MIDDLE NAME  
SPOUSE'S OCCUPATION / COMPANY \_\_\_\_\_

**FATHER'S COMPLETE NAME:** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  Deceased  
SURNAME, FIRST NAME MIDDLE NAME

**MOTHER'S COMPLETE NAME:** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  Deceased  
SURNAME, FIRST NAME MIDDLE NAME

**NAME OF CHILD/CHILDREN** (Include Date of Birth): \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

### EDUCATIONAL BACKGROUND

LEVEL	NAME OF SCHOOL <small>WRITE IN FULL</small>	DEGREE/COURSE	YEAR GRADUATED	HIGHEST LEVEL/ UNITS EARNED	SCHOLARSHIP/ ACADEMIC HONORS
ELEMENTARY					
SECONDARY					
VOCATIONAL/ TRADE COURSE/ TRAININGS					
COLLEGE					
GRADUATE STUDIES					

### WORK EXPERIENCE

(Start from your present employment. Attach additional sheet if necessary)

INCLUSIVE DATES <small>(MM/YYYY)</small>		DEPARTMENT / AGENCY / COMPANY <small>WRITE IN FULL</small>	POSITION TITLE <small>WRITE IN FULL</small>
FROM	TO		
FROM	TO		
FROM	TO		
FROM	TO		



**PHILIPPINE AMUSEMENT AND GAMING CORPORATION**

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**ADMINISTRATIVE QUESTIONS**

a. Have you ever been formally charged with an administrative, criminal or civil case? If Yes, give details.	<input type="checkbox"/> YES <input type="checkbox"/> NO
b. Have you ever been convicted of any crime for a violation of any law, decree, ordinance or regulation by any court or tribunal? If Yes, give details	<input type="checkbox"/> YES <input type="checkbox"/> NO
c. Have you ever been separated from the service through any of the following modes: retirement, dismissal, termination or AWOL in the public or private sector? If Yes, give details.	<input type="checkbox"/> YES <input type="checkbox"/> NO
d. Do you have any relative within fourth civil degree working in PAGCOR or in any of its licensees? If Yes, give details.	<input type="checkbox"/> YES <input type="checkbox"/> NO
e. Have you ever applied for a gaming license in this or any other jurisdiction (domestic or foreign)? If Yes, give details.	<input type="checkbox"/> YES <input type="checkbox"/> NO
f. Are you currently holding a gaming license or are registered with another gaming bureau, agency or department (domestic or foreign)? If Yes, give details.	<input type="checkbox"/> YES <input type="checkbox"/> NO
g. Have you ever been denied a gaming license, withdrawn a gaming license application or had any disciplinary action taken against any gaming license that you have held? If Yes, give details.	<input type="checkbox"/> YES <input type="checkbox"/> NO

**FINANCIAL HISTORY**

Do you have any debts or obligations (i.e. loans, mortgages) with any government agency or any banking institution?	<input type="checkbox"/> YES <input type="checkbox"/> NO
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NOTE: If you answered Yes to any of the questions above, give details on separate sheet and attach any pertinent document.

I declare that the foregoing information is true and correct to the best of my knowledge. I am also willing to submit additional requirements and to undergo periodic or random drug testing as may be required. I also authorize PAGCOR and/or any of its authorized representatives to verify/validate the information stated herein.

**RIGHT THUMBMARK**

**SIGNATURE**

**(Affix signature *WITHIN* the box. Use **BLACK** sign pen)**

**2X2 PICTURE**

**(White Background)**



**DATE ACCOMPLISHED:** \_\_\_\_\_