**STAFFING PLAN**

**For the Year**\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Basic Info/Data** | **Qualification Standards** | **Brief Description of the function of the position/job** | **Timeline/****Timeframe****(start date)** | **Staffing****Modifications (e.g. Reassignment, etc.)** | **Data on****PWD** |
| **Name** | **Position Title/SG** | **Office** | **of the Position** | **of the Incumbent** |
|  |  |  |  |  |  |  |  |  |

Prepared by: Recommended: Approved:

HRMO HRMPSB Chairperson and members Head of Agency

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| **DATA PRIVACY NOTICE: Data and information in this form are intended exclusively for the purpose of this activity. This will be kept by the process owner for the purpose of verifying and authenticating identity of the participants. Serving other purposes not intended by the process owner is a violation of Data Privacy Act of 2012. Data subjects voluntarily provided these data and information explicitly consenting the process owner to serve its purpose.** |