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***Annex G***

INDIVIDUAL EVALUATION SHEET (IES)

Application code:

|  |
| --- |
| Name of Applicant: |
| Position Applied For: |
| Schools Division Office: |
| Contact Number: |
| Job Group/SG-Level: |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Criteria** | **Weight Allocation** | **Applicant's Actual Qualifications** | | |
| **Details of Applicant's Qualifications**  *(Relevant documents submitted; additional requirements, notes of HRMPSB Members)* | **Computation** | **Actual Score** |
| Education |  |  |  |  |
| Training |  |  |  |  |
| Experience |  |  |  |  |
| Performance |  |  |  |  |
| Outstanding  Accomplishments |  |  |  |  |
| Application of Education |  |  |  |  |
| Application of Learning and  Development |  |  |  |  |
| Potential (Written Test, BEI,  Work Sample Test) |  |  |  |  |
| **TOTAL** | **100** |  |  |  |

I hereby attest to the conduct of the application and assessment process in accordance with the applicable guidelines; and acknowledge, upon discussion with the Human Resource Merit Promotion and Selection Board (HRMPSB), the results of the comparative assessment and the points given to me based on my qualifications and submitted documentary requirements for the **[insert position]** under **[insert office where the vacancy exists]**.

Furthermore, I hereby affix my signature in this Form to attest to the objective and judicious conduct of the HRMPSB evaluation through Open Ranking System.

|  |
| --- |
| Name and Signature of Applicant |
| Date: |

Attested:

HRMPSB Chair

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| --- | --- | --- | --- |
| **Doc. Ref. Code** | RO-ASD-F062 | **Rev** | 00 |
| **Effectivity** | 09.20.21 | **Page** | 1of 1 |