SPES Form 5

REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF LABOR AND EMPLOYMENT
REGIONAL OFFICE NO. CAR
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 *(LAST NAME, FIRST NAME, M.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:

_____
Name, Designation and Signature

_____
Date

Submitted by:

_____
Signature of PESO Manager

_____
Date

BLE Revision December 2016