SUBIC BAY METROPOLITAN AUTHORITY
LABOR DEPARTMENT
STANDARD LOCATORS / INVESTORS MASTERLIST OF PERSONNEL FORM

Effectivity Date : 07 October 2005

Form 1-B (continuation sheet), Page _____ of _____ pages

PERSONAL DATA							EMPLOYMENT DATA							
NO.	FULL NAME (Last, First, Middle Name) (In Alphabetical Order)	RESIDENTIAL ADDRESS (Permanent)	BIRTHDATE (mm/dd/yy)	PLACE OF BIRTH (Town/ City/ Province)	CIVIL STATUS	SEX	DESIGNATION (Position)	BASIC SALARY	DATE HIRED (mm/dd/yy)	EMP. STATUS	THRU AGENCY (Put Agency/ Company name)	WORK STATUS (Use Code Below)	DATE (mm/dd/yy)	OTHERS/ REMARKS

NOTE :

Kindly accomplish the above new table format for us to update and validate our statistics on the total number of employees within the Freeport Zone.
Please type or print legibly. Rest assured that all information gathered shall be used for statistical purposes and dealt with strict confidentiality.
We thank you in this regard.

CODING SYSTEM : WORK STATUS			
RES	Resigned	**FL**	Forced leave
TER	Termination	**RC**	Re-call
RET	Retrenched	**RH**	Re-hired