



REQUEST FORM

BJMPRO-NCR (Records Management Section)

DATE:

REQUESTER DETAILS

RANK & NAME:

JAIL/OFFICE:

SIGNATURE:

ATHORIZED REPRESENTATIVE (IF ANY)

RANK & NAME OF REPRESENTATIVE:

SIGNATURE:

Note: Attach Authorization Letter.

REQUESTED DOCUMENT (S) / DATA

SOFT COPY HARD COPY

- | | |
|------------------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> PDS year : _____ | <input type="checkbox"/> Long Pay Order year : _____ |
| <input type="checkbox"/> SALN year : _____ | <input type="checkbox"/> RCA Order year : _____ |
| <input type="checkbox"/> SPMS year : _____ | <input type="checkbox"/> General Order date : _____ |
| <input type="checkbox"/> Service Record | <input type="checkbox"/> Special Order date : _____ |
| <input type="checkbox"/> Appointment : _____ | <input type="checkbox"/> Letter Order date : _____ |
| <input type="checkbox"/> Oath of Office | <input type="checkbox"/> Commendation date : _____ |
| <input type="checkbox"/> Certificate of Undertaking | <input type="checkbox"/> Leave Records/Leave Credits |
| <input type="checkbox"/> Assumption of Duty | <input type="checkbox"/> Others (please specify) |
| <input type="checkbox"/> Certificate of Eligibility | |
| <input type="checkbox"/> Transcript of Records | |
| <input type="checkbox"/> Diploma | |
| <input type="checkbox"/> Birth Certificate | |
| <input type="checkbox"/> Marriage Contract | |
| <input type="checkbox"/> Birth Certificate (s) of Children | |

Purpose:

APPROVED DISAPPROVED

Chief, Records Management Section

Comments and Suggestions: (Optional)

To be filled out by Records Section In-charge

PREPARED BY:

DATE:



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