REPUBLIC OF THE PHILIPPINES BC-CSC Form No. 1				1. NAME OF EMPLOYEE	
POSITION DESCRIPTION FORM				FAMILY) (GIVEN) (M. I.)	
2. DEPARTMENT/CORPORATION OR AGENCY/LOCAL GOVERNMENT			 .	3. BUREAU OF OFFICE	
4. DEPT./BRANCH/DIVISION				5. WORK STATION/PLACE OF WORK	
6a. PRES. APPROP. ACT BOARD RES./ORD. NO.		6b PREV. APPROP ACT BOARD RES.		7a. SALARY AUTHORIZED	7b. OTHER COMPENSATION
OFFICIAL DESIGNATION OF POSITION			9. WORKING OF PROPOSED TITLE		
10 WAPCO CLASS	IFICATION (OF THIS TITLE 11.	occ	UPATIONAL GROUP TIT (leave blank)	LE
12. FOR LOCAL G MUNICIP	OVERNMENT PALITY () 1st 2 () (ord 3rd 4th 5th	OVER NCE (6 th	NMENTAL UNIT AND UI	NIT'S CLASS
13. STATEMENT C	OF DUTIES A	ND RESPONSIBILITIE	S. If	more space is needed, p	please attach addition
		DUTIES			

14. POSITION TITLE OF IMMEDIATE SUPERVISOR	15. POSITION TITLE OF NEXT HIGHER SUPERVISOR
16. NAMES, TITLES AND ITEM NOS. OF THOSE YO (if more than 1, list only by their item numbers a	
17. MACHINES, EQUIPMENT, TOOLS, etc. used reg Computer, printer	ularly in performance of work
18. CONTACTS Occasional Frequent Gen. Public [] [] Other Agencies [] [] Supervisors [] [] Management [] [] Others (Specify) [] []	19. WORKING CONDITION Normal Working condition [] Field Work [] Field Trips [] Exposed to varied weather [] Others (Specify) []
I CERTIFY that the above answers are accurate and	d complete.
Date	Signature of Employee
TO BE FILLED OUT	BY IMMEDIATE SUPERVISOR
position. Education: Experience: Training: Eligibility: 23. Licenses or certificates required to do this work	ition. Individual of education considered in filling up a vacancy for this vacancy for thi
I hereby certify that the above answers are acc	urate and complete.
 Date	Chief/Director
Date APPROVED:	Vice Chancellor
Date	Chancellor