2012 Officers and Board of Directors

President
ENGR. FIDEL W. EBLASIN JR
Yazaki-Torres Manufacturing, Inc.

Vice-President
BENJAMIN V. POLIDO
Knights of Corps Security Agency

Secretary
BARBIE FLORES
Daltio Philippines Inc.

Treasurer
DR. BENJO V. VALCONCHA
Bauza Valconcha Optical

Auditor
CORY ONG
Individual Member

Directors
MA. LUISA ABAD
Technoserve Management & Consultancy

JULIETO CANIZARES
M-Tech Industrial Services

ALICIA A. CLARIN
Sunstate Phils., Inc.

ARMINDA G. DAHILAN
Closure Systems Intl.

JENNIFER C. LAZARO
Kite Philippines, Inc.

ERNIE DELLOSA
Individual Member

NILO M. NATANUAN
Renelle Marketing

MANUEL TOLEDO
English Precision Phils., Inc.

CHRISTOPHER TORRES
Lyceum of The Philippines University-Laguna

Immediate Past President
ATTY. DELIA UV
JX Nippon Mining & Metals Phils., Inc.

Adviser
JOSE E. ESTINGOR
Fleet Express Management Network, Inc.

Want to get discounts when you attend a GMM? Want to be able to contact more practitioners in the region? Want to receive invites for all Chapter events such as GMMs, Seminars, Job Fairs, etc.? Receive copies of the Chronicle, PMAP-Calabarzon’s quarterly magazine? Want to attend to the National Convention and enjoy a hassle-free and discount registration?

WHAT ARE YOU WAITING FOR?

Be a PMAP-CALABARZON member now!!!

It’s this simple...

1. Fill-out an application form (at the GMM).
2. Submit it to the Registration/Secretariat.
3. Pay the annual membership fee to the Treasurer.

<table>
<thead>
<tr>
<th>Category</th>
<th>Corporate</th>
<th>Individual</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Member</td>
<td>P3,750.00</td>
<td>P2,500.00</td>
</tr>
<tr>
<td>Old Member</td>
<td>P2,000.00</td>
<td>P1,000.00</td>
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</tbody>
</table>

Please make all checks payable to: PMAP CALABARZON
BDO ACCT # 600-800-3723
BDO BANK – BRANCH STA. ROSA, SOUTH EXPRESSWAY

Please fax your transaction receipt to 049-502-6942
# APPLICATION FOR MEMBERSHIP

Corporate

Associate

Individual

Refered by: ________________ Date: ________________

Gentlemen,

I/We hereby apply for membership (check preferred category above) in the Personnel Management Association of the Philippines (PMAP) - Calabarzon Chapter, in accordance with its Constitution and By-Laws, which I/We pledge to follow.

My/our biographical data sheet of our representative is also accomplished for your reference and guide. I/we am/are aware that my/our membership carries financial responsibilities to the Association. I/We therefore certify that our representative is authorized to commit and sign, on behalf of the company, any or all of the expenses among which: entrance fees, monthly membership meeting fees, annual membership dues, seminar fees, annual conference/convention fees, and membership levies; and shall honor the same.

Regular Representative

Name ___________________________ Position / Designation ___________________________

Alternate Representative

Name ___________________________ Position / Designation ___________________________

Very truly yours,

(Name of the Co. / Organization)

(Chief Executive Officer)

(Position / Designation)

GENERAL INFORMATION

SEC / DTI Reg. No. __________ Date Filed: __________ Date Founded: __________

Name of Company: __________________________

Address: __________________________ Tel No. __________

Mailing Address: __________________________ Fax No. __________

Workforce: Regular: __________ Non-Regular: __________ Mgr/supv: __________ Total: __________

Paid-up Capitalization (In Calabarzon): __________________________

Latest gross revenue: __________________________

Ownership: 100% Filipino 100% Foreign (what Nationality) __________________________ Joint Venture Filipino __________ %

Unionized? Yes No No. of union members: Rank and File: __________________________ Supervisory: __________________________ Foreign % Nationality __________ %

If yes, name of union: __________________________ Foreign % Nationality __________ %

Name of Federation (if affiliated): __________________________

Foreign % Nationality __________ %

Board of Directors / Management Officers:

<table>
<thead>
<tr>
<th>Name</th>
<th>Official Designation</th>
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What sectoral group would you like to be classified for PMAP research studies / activities? Check one:

- [ ] Advertising
- [ ] Agro-industrial
- [ ] Automotive and auto products
- [ ] Banking
- [ ] Chemical and Chemical products
- [ ] Community and Social Services
- [ ] Construction and Real Estate
- [ ] Consumer products
- [ ] Drugs and Pharmaceuticals
- [ ] Metal Products / Appliances
- [ ] Financial / Insurance
- [ ] Foods and Beverages
- [ ] Textile and Garments
- [ ] Hotels and Restaurants
- [ ] Management Services
- [ ] Manpower and Security Services
- [ ] Media and Entertainment
- [ ] Semiconductor/Electronics/Lights/Electrical wiring
- [ ] Telecom
- [ ] Tobacco / Cigarette
- [ ] Trading / Marketing
- [ ] Transport / Cargo
- [ ] Wood / Wood Products
- [ ] Educational / Research
- [ ] Paper / Paper products
- [ ] Mining / Quarrying / Loggi
- [ ] Others
**BIOGRAPHICAL DATA REPRESENTATIVE** (Attach resume or use additional sheets if necessary).

<table>
<thead>
<tr>
<th>Name:</th>
<th>Date of Birth</th>
<th>Place of Birth</th>
<th>Civil Status</th>
<th>Nickname</th>
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**Residence Address:**

**Name of the Company:**

**Company Address:**

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<tr>
<th>Position:</th>
<th>Since When:</th>
<th>Length of Service in the Company:</th>
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**EMPLOYMENT RECORDS**

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**EDUCATION**

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<th>School Attended</th>
<th>Degree Obtained</th>
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**TRAINING**

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<tr>
<th>Sponsor / Organization</th>
<th>Course Title</th>
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**EMPLOYMENT RECORD (Professional, Civic, Trade, Religious, Organization)**

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Please indicate your line of expertise in Personnel.

Please indicate areas where you can be in service to PMAP.

**BIOLOGICAL DATA OF ALT. REPRESENTATIVE** (Attach resume or use additional sheets if necessary).

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