

Deadline for submission of application for the following positions are EXTENDED until JANUARY 8, 2022, 5:00PM:

POSITION TITLE	PLANTILLA ITEM NOS.	TRAINING	EXPERIENCE	COMPETENCY	PLACE OF ASSIGNMENT
MEDICAL SPECIALIST II – FULL TIME	MDSP2-30013-2020	8 HRS OF RELEVANT TRAINING	2 YRS OF PROGRESSIVELY RESPONSIBLE EXPERIENCE AS MEDICAL SPECIALIST OR RELATED EXPERIENCE	<ol style="list-style-type: none"> 1. ORGANIZATIONAL COMMITMENT 2. INTEGRITY 3. QUALITY SERVICE FOCUS 4. TEAMWORK 5. STEWARDHIP OF RESOURCES 6. SELF – DEVELOPMENT 7. ATTENTION TO COMMUNICATION 	MEDICAL DIVISION
	MDSP2-30015-2020				

Kindly submit the following documents at the Human Resource Management Office **on or before January 8, 2022, 5:00PM:**

1. Letter of Intent or Application Letter

Addressed to:

MARY GRACE H. REYES, MD, MPH, MMHA, FPSMS, FPDS

Officer-In-Charge, Medical Center Chief II

Thru: **CHRISTOPHER B. VILLAFRIA**

Supervising Administrative Officer

Human Resource Management Office

2. Completely filled out Personal Data Sheet (CS Form 212 Rev 2017)

(PLEASE FILL OUT PROPERLY; FOR THE TRAININGS, PLEASE PROVIDE THE APPROPRIATE CERTIFICATE AS PROOF)

3. **Credentials.** Photocopy of Authenticated/Certified True Copy of:

- Diploma
- Transcript of Records
- Certification of Completion of Residency Training, Diplomate or Fellow, if applicable
- Certificate of Training/Seminars Attended, if applicable

Note: Authenticated/Certified True Copy must be presented upon submission of complete requirements

4. **Eligibility.** Photocopy of Authenticated/Certified True Copy of:

- PRC License, Board Rating, and Board Certificate
- CSC Professional and/or Sub-professional
- Other related eligibility

Note: Authenticated/Certified True Copy must be presented upon submission of complete requirements

5. Original copy of latest **NBI Clearance**

6. Photocopy of **Performance Rating** in the last rating period, if applicable


7. Photocopy of **Certificate of Employment with Actual Duties and Responsibilities**, if applicable

8. Photocopy of **Birth Certificate** (PSA Copy)

9. Photocopy of **Marriage Certificate** (PSA Copy)

- Requirements shall be placed in a **long folder and fastener** with your name and position applying for written on the upper right side of the folder
- **APPLICATION WITH INCOMPLETE DOCUMENT/S AND DOCUMENT/S THAT ARE NOT PROPERLY FILLED OUT WILL NOT BE ACCEPTED**

Thank you.


CHRISTOPHER B. VILLAFRIA
Supervising Administrative Officer