REPUBLIC OF TH	IE PHILIPPINES		1. NAME OF E	MPLOYEE				
BC-CSC FORM NO. 1								
(POSITION DESCRIPTION FORM)			(FAMILY NAME) (GIVEN NA		ME) (MI)			
2. DEPT./CORP. OR AGENCY/LOCAL GOV'T.			3. BUREAU OR OFFICE					
4. DEPT./BRANCH/DIVISION			5. WORK STATION/PLACE OF WORK					
6.a. Pres. Approp.	Act.	6.b. Prev. Approp	o. Act.	7.a. Salary	7.b. Other			
Board Res./		Board Res./		Authorized:	Compensation;			
Ord. No.		Ord. No.						
Item No.		Item No.		Actual:				
8. OFFICIAL DESIGNATION OF POSITION		ON	9. WORKING OR PROPOSED TITLE					
10.WAPCO CLASS	IFICATION OF THIS	POSITION	11.OCCUPATIONAL GROUP TITLE					
			(leave blank)					
12 FOR LOCAL GO	N/EDNIMENIT DOSITI	ON CHECK COVE	ONINAENITAI LINIIT	RNMENTAL UNIT AND UNIT'S CLASS				
12.FOR LOCAL GC	VERNIVIENT POSITI	ON, CHECK GOVER	KINIVIENTAL OINIT	AND UNIT 3 CLASS				
	MUNICIPALITY			PROVINCE				
1 <sup>S7</sup>		3 <sup>RD</sup>	4 <sup>TH</sup>	5 <sup>TH</sup> 6 <sup>TH</sup>	<b>7</b> ™			
		¬			,			
13 STATEMENT C	OF DUITIES AND RES	PONSIBILITIES If n	nore snace is nee	ded, please attach addi	tional sheet/s			
	7 201123711121123		Tiore space is free		tional streety s.			
PERCENT OF WORKING			DUTIES					
TIME			DOTTES					

14. POSITION TITLE OF IMMEDIATE SUPERVISOR			15. POSITION TITLE OF NEXT HIGHER SUPERVISOR		
16. NAMES, TITLE AND and titles)	ITEM NOS. OF THOSE	YOU DIREC	TLY SUPE	RVISE (If more than 7, list only by their item nos.	
17. MACHINES, EQUIPN	/IENTS, TOOLS, etc. us	sed regularl	ly in the p	erformance of work.	
18. CONTACTS				19. WORKING CONDITIONS	
	Occasional	Freque	ent	Normal working condition	
General Public				Field Work	
Other Agencies	_			Field Trips	
Supervisors				Exposed to varied	
Management	-			weather	
Others (Specify)				Others (Specify)	
20. I CERTIFY THAT THE	ABOVE ANSWERS AR	RE ACCURAT	TE AND C	OMPLETE.	
			-	01011171175 07 51 171 0V55	
	DATE	LED OUT D		SIGNATURE OF EMPLOYEE	
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