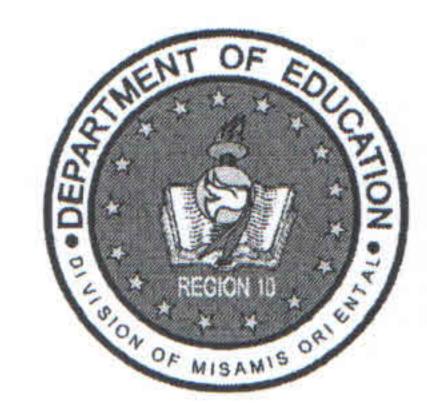


Republic of the Philippines Department of Education Region X DIVISION OF MISAMIS ORIENTAL

Cagayan de Oro City Tel Nos.: (088) 856-4454 / (08822) 72-46-15 Fax No.: (088) 856-4524 / e-mail: misamisoriental@deped.gov.ph



DIVISION MEMORANDUM

No. % s. 2015

To : PS District Supervisors

Elementary and Secondary School Administrators Teaching and Non-Teaching Personnel This Division

CONTRACT Schools Division Superintendent From :

Date : April 14, 2015

Subject: Division Human Resource Information System (DHRIS)

- 1. In preparation for the implementation of Division Human Resource Information System DHRIS, all teaching and non-teaching personnel of this division are enjoined to accomplish the enclosed DHRIS Form on or before April 27, 2015.
- 2. Furthermore, the following are the required attachments:
 - a. Hardcopy of Updated Service Record
 - b. Scanned copy of 201 File documents to all-in single PDF file format in order, as follows:
 - i. Original Copy Appointment
 - ii. Latest Copy Appointment
 - iii. Personal Data Sheet
 - iv. CSC Eligibility/PRC License ID
 - v. PBET/LET Rating
 - vi. Advice Order
 - vii. Transcript of Records
 - viii. First Day of Service
 - ix. Assignment/Reassignment Order
 - c. Soft copy of recent passport size ID Photo (JPEG format) with white background preferably wearing Monday uniform.
- Accomplished forms shall be consolidated by District ICT Coordinator/School HRIS Coordinator in preparation for next phase - DHRIS Process Phase. Items B and C in paragraph 2 shall be consolidated separately in 2 DVDs containing all personnel with filename "lastname_firstname".
- 4. Immediate dissemination and compliance of this memorandum is desired.

/dpu_elg

Department of Education Region X DIVISION OF MISAMIS ORIENTAL Cagayan de Oro City

DIVISION HUMAN RESOURCE INFORMATION SYSTEM

Personnel Profile

	PERS	SONAL INFORMATION		
Last Name:		Family Member	1	
First Name:		Name	Relation	Birthdate (mm/dd/yyyy)
Middle Name:				
Extension Name:				
Gender:				
Civil Status:				
Date of Birth (mm/dd/yyyy):				
Place of Birth:				
Residential Address:				
Barangay:				
City/Municipality:				
Province:		In case of Emergency, Contact:		
Postal Code:		Name:		
Contact No.		Address:		
Email Address:		Contact No.:		
	EMPLO	DYMENT INFORMATION		
TIN No.		Work Station:		
Philhealth ID No.		Municipality/City:		
GSIS ID No.		District:		
GSIS BP No.		School:		
Pag-Ibig No.		School ID No.:		
		Alternative Learning System (District):		
CSC Eligibility/PRC License No.		Division Office		
Employment Status: Mark X (if applicable)		Division Office Department:		
	Permanent	Unit:	-	
	Temporary	Assignment:	-	
	Substitute	Mark X, if applicable	Class Adviser	Grade Level (pls. indicate)
	Casual		Monograd	
	Contractual		Multigrade	
	Job Order		Subject Teacher only	
Effective Date of Appointment:			Subject Taug	ht:
Employee ID No.				English
Station ID No.				Mathematics
Payroll Account No:	_			Filipino
Plantilla Position:				Science
Present Salary Grade:				Araling Panlipunan
Step Increment:				TLE
Plantilla Item No:				MAPEH
Plantilla Assignment:				Edukasyon sa Pagpapakatao
Mark X (if applicable)	Kindergarten		Handling SPED Class Handling Full-Time Ancilla	ny Sanjicas
		Leave/Service Credits as of March 31, 2015	nanunny run-nine Ancilla	y Services
	Elementary Secondary (specify name of			
	school below)	Total Leave/Service Credits Available	Sick Leave	Vacation Leave
	OSDS	TOTAL LEAVE/SELVICE CIECULS AVAIIADIE	1	<u> </u>
	CID			
	SGOD			

EDUCATIONAL ATTAINMENT							
				Highest Level/units earned if not			
College:				graduated	Year Graduated		
Name of School:							
Course:						_	
Major:							
Minor:							
Graduate Studies:							
Masteral:							
Doctorate:							
		NATIONA					
		Assessment					
Level	Category	Date (mm/dd/yyyy)	Assessm	ent Venue		Sponsor	
		SEMINAD	S & TRAININGS				
		JEMINAR		•			
Level (School/District/Division/R							Role (Participant/ Facilitator/
egional/ National/ International	Title (from most recent)	No. of Hours	From (mm/dd/yy)	To (mm/dd/yy)	Sponsor	Venue	Resource Speaker/Trainor)
	nue (nom most recent)		(-ponton		opouloi, itulioi,
							+
OUTSTANDING ACCOMPLISHMENT/ACHIEVEMENT							
Level (Division/Regional/		Date					

Level (Division/Regional/ National/International)	Title	Date (mm/dd/yyyy)	Sponsor	Venue

Certified True and Correct:

Verified by: