




Republic of the Philippines
Department of Education
Region X
DIVISION OF MISAMIS ORIENTAL
Cagayan de Oro City
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DIVISION MEMORANDUM

No. 86 s. 2015

To : PS District Supervisors
Elementary and Secondary School Administrators
Teaching and Non-Teaching Personnel
This Division

From :  **CHERRY MAE L. LIMBACO, Ph.D., CESO V**
Schools Division Superintendent

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.
3. 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.

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DIVISION HUMAN RESOURCE INFORMATION SYSTEM
Personnel Profile

PERSONAL INFORMATION

Last Name: _____
 First Name: _____
 Middle Name: _____
 Extension Name: _____
 Gender: _____
 Civil Status: _____
 Date of Birth (mm/dd/yyyy): _____
 Place of Birth: _____
 Residential Address: _____
 Barangay: _____
 City/Municipality: _____
 Province: _____
 Postal Code: _____
 Contact No. _____
 Email Address: _____

Family Member

Name	Relation	Birthdate (mm/dd/yyyy)

In case of Emergency, Contact:

Name: _____
 Address: _____
 Contact No.: _____

EMPLOYMENT INFORMATION

TIN No. _____
 Philhealth ID No. _____
 GSIS ID No. _____
 GSIS BP No. _____
 Pag-Ibig No. _____
 CSC Eligibility/PRC License No. _____

Work Station: _____
 Municipality/City: _____
 District: _____
 School: _____
 School ID No.: _____
 Alternative Learning System (District): _____

Employment Status:

Mark X (if applicable)

- Permanent
- Temporary
- Substitute
- Casual
- Contractual
- Job Order

Division Office

Department: _____
 Unit: _____

Assignment:

Mark X, if applicable

- Class Adviser _____ Grade Level (pls. indicate)
- Monograde _____
- Multigrade _____
- Subject Teacher **only**

Effective Date of Appointment: _____
 Employee ID No. _____
 Station ID No. _____
 Payroll Account No. _____
 Plantilla Position: _____
 Present Salary Grade: _____
 Step Increment: _____
 Plantilla Item No: _____
 Plantilla Assignment: _____

Mark X (if applicable)

- Kindergarten
- Elementary
- Secondary (specify name of school below) _____
- OSDS
- CID
- SGOD

Subject Taught:

- English
- Mathematics
- Filipino
- Science
- Araling Panlipunan
- TLE
- MAPEH
- Edukasyon sa Pagpapakatao

- Handling SPED Class
- Handling Full-Time Ancillary Services

Leave/Service Credits as of March 31, 2015

Total Leave/Service Credits Available	Sick Leave	Vacation Leave

