



Republic of the Philippines
OFFICE OF THE OMBUDSMAN
 Agham Road, Diliman, Quezon City

APPLICATION FOR OMBUDSMAN CLEARANCE

HONORABLE CONCHITA CARPIO MORALES
 Ombudsman

I respectfully request your good office to issue a clearance in my favor for:
 (Please indicate your purpose by checking (✓) the appropriate box)

<input type="checkbox"/>	RETIREMENT	_____	_____	_____
		Month	Day	Year
<input type="checkbox"/>	RESIGNATION	_____	_____	_____
		Month	Day	Year
<input type="checkbox"/>	OTHERS (please specify)	_____		

Your kind consideration on this matter will be greatly appreciated.

Very truly yours,

_____	_____	_____
FIRST NAME	MIDDLE NAME	LAST NAME
HOME ADDRESS: _____		
POSITION: _____		
NAME OF THE OFFICE OR COMPANY: _____		
ADDRESS: _____		
CONTACT NUMBER: _____		

Signature over Printed Name

ATTACHMENTS:

For civilian employee:

- *Indorsement Letter
- *Certified True Copy of Service Record
- *Authorization with photocopy of valid ID

For Uniformed Personnel:

- Retirement Order/Letter Request from the Adjutant
 (In the absence of Retirement Order) for AFP Personnel
- Certified photocopy of Statement of Service
- Authorization with photocopy of valid ID

IMPORTANT: File not earlier than three (3) months for civilian employees and six (6) months for AFP/PNP/BJMP/BFP/PCG before retirement/resignation date.

INFORMATION SHEET

- 1) NAME OF APPLICANT _____
FIRST NAME MIDDLE NAME LAST NAME
- 2) DATE OF BIRTH _____ 3) PLACE OF BIRTH _____
- 4) PROVINCIAL ADDRESS _____
- 5) CITY ADDRESS _____
- 6) CIVIL STATUS _____ 7) SEX _____ 8) NAME OF SPOUSE _____

9) EDUCATIONAL BACKGROUND

	SCHOOL ATTENDED	DATE OF ATTENDANCE	DEGREES EARNED
9.A) ELEMENTARY	_____	_____	_____
9.B) HIGH SCHOOL	_____	_____	_____
9.C) COLLEGE OR UNIVERSITY	_____	_____	_____

9.D) HIGHEST EDUCATIONAL ATTAINMENT _____

10) HISTORY OF EMPLOYMENT

10.A) GOVERNMENT OFFICE

	NAME OF OFFICE	ADDRESS/ REGION	POSITION	INCLUSIVE DATES
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

10.B) PRIVATE OFFICE

	NAME OF OFFICE	ADDRESS/ REGION	POSITION	INCLUSIVE DATES
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

- 11) Have you been criminally or administratively charged before any court or administrative body?
If YES, please state the:

CASE NO. _____ and RESULT _____

I DECLARE UNDER THE PENALTIES OF PERJURY THAT THE ANSWERS GIVEN ABOVE ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

DATE ACCOMPLISHED

Signature over Printed Name