

CIA REQUIREMENTS

DE LA SALLE UNIVERSITY FOUNDATION
OFFICIAL TRANSCRIPT OF RECORD

NAME: [Redacted] GRADE: [Redacted] COURSE: [Redacted]

Transcript of Record showing academic performance from 1990 to 2000.

EDUCATION

Scan copy of
Transcript of Record
or
Diploma



GOVERNMENT ISSUED IDENTIFICATION

Document Requirements:

- ✓ Picture
- ✓ Name
- ✓ Expiration Date

We recommend using a
passport or driver's license

Experience Verification Form

NAME: [Redacted] ADDRESS: [Redacted] PHONE: [Redacted]

DATE OF BIRTH: [Redacted] DATE OF ENTRY: [Redacted]

PLEASE CHECK THE FOLLOWING FACTORS WITH CORRESPONDING EXPERIENCE. PLEASE USE ADDITIONAL FORMS IF NEEDED.

NAME OF ORGANIZATION: [Redacted] TYPE OF ORGANIZATION: [Redacted]

TYPE OF INDUSTRY: [Redacted] DATE IDENTIFIED: [Redacted]

STATE OF RESIDENCE: [Redacted] TYPE OF RESIDENCE: [Redacted]

REASON FOR LEAVING: [Redacted]

STATEMENT OF VERIFICATION: [Redacted]

WORK VERIFICATION

2 years work experience

- Audit internal/external
- Quality
- assurance
- Compliance
- Risk management
- Internal Control

*****For married female - Certified True
Copy of NSO-issued Marriage**