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| REPUBLIC OF THE PHILIPPINES BS-CSC Form No.1 (POSITION DESCRIPTION FORM) | | 1. NAME OF EMPLOYEE (Family Name) (Given Name) (Middle Name) | | | |
| 2. DEPARTMENT, CORPORATION OR CITY OF KORONADAL WATER DISTRICT | | 3. BUREAU OF OFFICE | | | |
| 4. DEPARTMENT/BRANCH/DIVISION | | 5. WORK STATION/PLACE OF WORK | | | |
| 6. a. RES. APPROP. ACT BOARD RES. ORD. NO. ITEM NO. | 6. b. PREV. APPROP. ACT BOARD RES. ORD. NO. ITEM NO. | 7. SALARY AUTHORIZED ACTUAL | | OTHER COMPENSATION ACA/PERA-RATA | |
| 8. OFFICIAL DESIGNATION OF POSITION | | | 9. WORKING OR PROPOSED TITLE | | |
| 10. WAPCO CLASSIFICATION OF THIS POSITION | | | 11. OCCUPATIONAL GROUP TITLE (leave blank) | | |
| 12. FOR LOCAL GOVERNMENT POSITION, CHECK GOVERNMENT UNITS AND UNIT CLASS <div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;"> <input type="checkbox"/> MUNICIPALITY <input type="checkbox"/> 1st <input style="width: 50px; height: 20px;" type="text"/> </div> <div style="text-align: center;"> <input type="checkbox"/> CITY <input type="checkbox"/> 2nd <input style="width: 50px; height: 20px;" type="text"/> </div> <div style="text-align: center;"> <input type="checkbox"/> PROVINCE <input type="checkbox"/> 3rd <input style="width: 50px; height: 20px;" type="text"/> </div> <div style="text-align: center;"> <input type="checkbox"/> 4th <input style="width: 50px; height: 20px;" type="text"/> </div> <div style="text-align: center;"> <input type="checkbox"/> 5th <input style="width: 50px; height: 20px;" type="text"/> </div> <div style="text-align: center;"> <input type="checkbox"/> 6th <input style="width: 50px; height: 20px;" type="text"/> </div> <div style="text-align: center;"> <input type="checkbox"/> 7th <input style="width: 50px; height: 20px;" type="text"/> </div> </div> | | | | | |
| 13. STATEMENT OF DUTIES AND RESPONSIBILITIES. If more space is needed, please attached additional sheets. DUTIES AND RESPONSIBILITIES: | | | | | |