



**AEP APPLICATIONS EVALUATION SHEET**  
**[To be accomplished by the DOLE Regional/Field Office]**

Name of Alien : \_\_\_\_\_  
 Position/s : \_\_\_\_\_  
 Nationality : \_\_\_\_\_  
 Company : \_\_\_\_\_  
 Address : \_\_\_\_\_  
 AEP Number : \_\_\_\_\_ Validity : \_\_\_\_\_ Industry Code: \_\_\_\_\_

**I. CHECKLIST OF REQUIREMENTS**

(Original and other documents, when applicable, should be presented for validation. AEP Card must be surrendered to the issuing DOLE-Regional Office upon expiration of AEP or termination of employment.)

**DOCUMENTS SUBMITTED**

**[ ] NEW**

- [ ] Application Form duly accomplished
- [ ] Contract of Employment/ Appointment or Board Secretary's Certificate of election
- [ ] Photocopy of Employer's Mayor's Permit to operate business
- [ ] Photocopy of passport with visa or Certificate of Recognition for refugees
- [ ] if filed by a representative, authorization from the company or foreign national

**[ ] RENEWAL**

- [ ] Application Form duly accomplished
- [ ] Renewal of Employment Contract/Appointment or Board Secretary's Certificate of election
- [ ] Photocopy of Employer's Mayor's Permit to operate business
- [ ] Photocopy of passport with visa or Certificate of Recognition for refugees
- [ ] If filed by a representative, authorization from the company or foreign national
- [ ] Photocopy of AEP previously issued

**II. EVALUATION AND ACTION TAKEN**

1. ASSESSMENT AND EVALUATION OF APPLICATION

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

RECOMMENDATION:

\_\_\_\_\_  
 \_\_\_\_\_

EVALUATOR	DATE RECEIVED	DATE RELEASED
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2. RECOMMENDATION [ ] FOR APPROVED [ ] OTHERS

CHIEF	DATE RECEIVED	DATE RELEASED
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3. ACTION TAKEN [ ] APPROVED [ ] OTHERS

REGIONAL DIRECTOR	DATE RECEIVED	DATE RELEASED
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**III. PAYMENTS                      AMOUNT                      OFFICIAL RECEIPT No.                      DATE**

Fees	_____	_____	_____
Fines	_____	_____	_____
Date of Publication:	_____	Newspaper	_____