

PARTICIPANT'S PROFILE SHEET

Risk-Based Audit Methodology

July 25-26, 2014 (Friday-Saturday)
Pearlmount Inn, Limketkai Drive, Cagayan de Oro City

PRINTED NAME:

First Name

M.I

Surname

NICKNAME: _____ BIRTHDAY: _____

SEX: _____ AGE: _____ CIVIL STATUS: _____

COOP BANK/RURAL BANK: _____

DESIGNATION: _____

TEL. NOS. _____ FAX NO. _____

E-MAIL ADD: _____ MOBILE NO: _____

EDUCATIONAL BACKGROUND:

	COURSE/DEGREE	INSTITUTION	YEAR GRADUATED
POST GRADUATE			
COLLEGE			

WORK EXPERIENCE: (LAST 2 INCLUDING CURRENT EMPLOYMENT)

COMPANY	INCLUSIVE YEAR(S) OF EMPLOYMENT	POSITION HELD