

CERTIFICATION on Performance Rating*

This is to certify that (complete name of temporary appointee) has rendered Very Satisfactory actual work performance under temporary status from (complete date indicated on the appointment paper) to (complete date concluding the one-year temporary appointment being invoked or the entire rating period) as (complete title of position indicated in the appointment paper including parenthetical title, if any) in the (complete name of office/department/division/section/unit) of the (complete name and address of the agency) , with the following details:

1st Rating Period (minimum of 3 months)

From : (complete date with month, day, and year)
To : (complete date with month, day, and year)
Numerical Rating : _____
Adjectival Rating : _____

2nd Rating Period (minimum of 3 months)

From : (complete date with month, day, and year)
To : (complete date with month, day, and year)
Numerical Rating : _____
Adjectival Rating : _____

This Certification is issued in support of the evaluation/processing of application for grant of eligibility pursuant to Category II of CSC MC No. 11, s. 1996, as amended, and CSC MC No. 3, s. 2008.

(Signature over full printed name of
agency head or highest HRMO/PO)

(Complete position title of the signatory)

(Date)

NOTE: The two rating periods shall cover at least 10 months to be considered for the grant of eligibility. In no case shall the two rating periods be less than 10 months or be more than 12 months.

*To be printed on agency official letterhead.