

PHILIPPINE MINERAL REPORTING CODE (PMRC)

APPLICATION FOR ACCREDITATION AS A **COMPETENT PERSON** FOR REPORTING ORE RESERVES

Name of Applicant : _____

Classification CP Applied for : _____

Date of Application : _____

Endorsing PSEM Chapter : _____

I. PERSONAL INFORMATION

Name:	Date Of Birth:
Spouse:	Children:
Home Address:	
Home Phone No.:	Company Name/Employer:
Mobile Phone No.:	
Email Address:	Company Address:
Company Phone No. /Fax No.:	

II. EDUCATION AND TRAINING

Graduate Degree	College / University	Inclusive Dates (Year)
Post-Graduate	College / University	Inclusive Dates (Year)
Relevant Trainings	Description	Inclusive Dates (Year)
Relevant Seminars	Seminar Title Presented (Use Separate sheet if necessary)	Inclusive Dates (Year)

III. PROFESSIONAL REQUIREMENTS

Citizenship	
PRC License No.	
Registration Date	
PTR No.	

IV. RELEVANT PROFESSIONAL EXPERIENCE

Relevant experience denotes professional work in various fields of mining/extraction of resources. This form is intended to catalogue professional experience in order to establish specific skills and specialties developed by the mining engineer. Each project experience should be described in one form following the specific details in each of the boxes. In cases of short term endeavors which are repetitive in nature they maybe collectively described in one form. This may be a frequent task whilst employed with a company.

INSTRUCTIONS ON HOW TO FILL THE RELEVANT PROFESSIONAL EXPERIENCE FORM

Box	Box Title	Description
1	Name	Name of applicant
2	Project No.	Sequential numbering
3	Relevant Work Experience	Relevant work experience categories such as ore reserve estimation, supervision of mining operation etc.
4	Mineral Commodity	Common elements and minerals such as copper, gold, nickel, etc.
5	Employment	Employment categories such as private mining company, government agency, private contractor, etc.
6	Name and Location of Projects	It is important to indicate the country of project
7	Description of Projects	Basic information of the project which will include the objectives and project cost.
8	Name of Company / Employer	Self explanatory
9	Address of Company / Employer	Self explanatory
10	Services Rendered	Described actual services rendered, responsibilities and accomplishments
11	Period of Engagement (Inclusive dates)	The period of engagement which requires inclusive dates indicating employment or contractual duration
12	Duration of Engagement (Man-Months)	Man-Months refers to the actual time the professional tasks have been undertaken
13	Counterpart staff / Co-Workers	Person(s) directly responsible to or co-professionals / workers in the task
14	Report on Project and Authorship	Indicate the title of the report, date and whether senior or co-author of the report

RELEVANT PROFESSIONAL EXPERIENCE FORM

Name		Project No.
Relevant Work Experience Category	Mineral Commodity	Employment
Name of Project	Location of Project (indicate specific location/country)	
Description of Project		
Name of Company/Employer		
Address of Company/Employer		
Services Rendered		
Period of Engagement (inclusive dates)		
Duration of Engagement		
Counterpart Officer / Co-workers		
Report on Project (Title and Authorship)		

V. AWARDS, DISTINCTION, RECOGNITION

Conferring Body	Award, Distinction, Recognition	Date Conferred

VI. MEMBERSHIP IN ORGANIZATIONS

Organization	Position	Date
A. Professional Organization		
B. Civic Organization		
C. Religious Organization		

VII. REFERENCES

Name	
Address	
Phone No./Mobile No.	
Email Address	
Profession/Position/Designation	
Affiliation (Company, Gov't Agency, Etc)	

Name	
Address	
Phone No./Mobile No.	
Email Address	
Profession/Position/Designation	
Affiliation (Company, Gov't Agency, Etc)	

Name	
Address	
Phone No./Mobile No.	
Email Address	
Profession/Position/Designation	
Affiliation (Company, Gov't Agency, Etc)	

I hereby certify that all information in this "Application for Accreditation as a Competent Person for Reporting Ore Reserves" are true and correct to the best of my knowledge and belief. I also declare that I shall abide by the Code of Ethics of the PSEM.

Applicant's Signature over Printed Name

Date

Subscribed and sworn to before me this _____ day of _____ 20____,
affiant exhibited to me his/her community tax certificate no. _____ issued
on _____ at _____.

Notary Public

Doc. No. _____
Page No. _____
Book No. _____
Series of _____

