

Republic of the Philippines

Department of Education

REGION I SCHOOLS DIVISION OF DAGUPAN CITY

Office of the Schools Division Superintendent

October 4, 2024

DIVISION MEMORANDUM

No.: 408 , s. 2024

COMPLIANCE TO THE APPLICATION OF DEPED FIELD OFFICES FOR PNPKI DIGITAL CERTIFICATES

To: Assistant Schools Division Superintendent Chiefs of Functional Division- CID & SGOD Education Program Supervisors Public Schools District Supervisors School Heads Teaching & Non-teaching Personnel

In reference to the OUA-OUT Memorandum dated October 26, 2023, and DepEd RO1 RM No. 1233 s2023 entitled Application of DepEd Field Offices for PNPKI Digital Certificates.

SDO Dagupan City continues to comply with government policies on the adoption of electronic commerce. Hence, in partnership with the Department of Information and Communications Technology Regional Office I, the issuance of the Philippine National Public Key Infrastructure (PNPKI) Digital Certificates for all DepEd priority employee are enjoined.

For case of access and faster processing, a *link* will be forwarded to the School ICT Coordinators that contains the template form, google sheet per school and step by step instruction as indicated in the Memorandum. It is advised to log in your DepEd Email Account when accessing the said link for control and to comply with the Data Privacy Act.

Immediate and widest dissemination of the contents of this memorandum is desired

ROWERA C. BANZON EdD, CESO V Schools Division Superintendent







Address: Burgos St., Poblacion Oeste, Dagupan City

Telephone: (075) 653-4101
Website: depeddagupan.com
email: dagupan.city@deped.gov.ph



Republic of the Philippines

Department of Education

OFFICE OF THE UNDERSECRETARY FOR ADMINISTRATION

OUA-OUT-

MEMORANDUM

FOR

ATTY, REVSEE A. ESCOBEDO

Undersecretary for Operations

FRANCIS CESAR B. BRINGAS Assistant Secretary for Operations

Regional Directors and BARMM MBHTE Minister

Schools Division Superintendents

Region and Division Information Technology Officers

Public School Heads All Others Concerned

FROM

NOLASCO A. MEMPINA

Undersecretary for Administration

SUBJECT

APPLICATION OF DEPED FIELD OFFICES FOR PNPKI

DIGITAL CERTIFICATES

DATE

26 OCTOBER 2023

To comply with government policies regarding the adoption of electronic commerce in 2021, the Department of Education (DepEd) in partnership with the Department of Information and Communications Technology (DICT) applied for the issuance of the Philippine National Public Key Infrastructure (PNPKI) Digital Certificates for its employees.

The Philippine National Public Key Infrastructure (PNPKI) is a sophisticated digital security framework that ensures that online transactions are secure. It uses advanced encryption techniques to safeguard digital information, providing a reliable and trusted way to protect sensitive data and conduct secure online activities in the Philippines.

Under DepEd's MATATAG Agenda component two "Take steps to accelerate delivery of basic education facilities and services", the adoption of PNPKI in DepEd offices as part of digitizing our essential processes, may ripple impact on:

1. Fostering trust within the DepEd Offices by ensuring secure and reliable online transactions.

2. Integration of the use of digital signature in the process flow and vastly increase the integrity of acceptance on the official documents within and outside the department.

3. Increased trust in online relationships due to ensured security of digital data and transactions that is authentic, confidential, with integrity and

is non-repudiation.

Since PNPKI digital certificates are only valid for two (2) years upon activation, the Information and Communications Technology Service (ICTS) will lead the facilitation of the PNPKI application activities again.

For related issues on the subject at hand, refer to the following attachments:

-	ditional information on PNPKI application and related matters
Annex A Add	sponsibilities of PNPKI Regional Project Management Teams (RPMT)
Day Day	enonsibilities of PNPKI Regional Project Management
THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAM	- CD of DNDK I SUBMISSION CHAINIES
THE RESIDENCE PROPERTY AND ADDRESS OF THE PERSON OF THE PE	- iden when filling-out the PNPKI Application form
Annex D. Th	ings to consider while the Forms by Governance Level
Annex E Sa	mple Filled-out PNPKI Application Forms by Governance Level
The second secon	「発表を表現した。」
	Don't Remonal Uffice Persumer (Complete Sumplement)
Annex E-1	DepEd Schools Division Offices (SDOs) Personnel
Annex E-2	DepEd Schools Division Onces (52 57 - Schools Personnel
Annex E-3	DepEd Schools Division Offices (2015) DepEd Public Elementary and Secondary Schools Personnel
	THE PARK MEMBER TO THE PROPERTY OF THE PARK THE
The second secon	Development (complete sample sell
Annex E-4	Office Derconnel
Annex E-5	BARMM-MBHTE Division Office Personnel
Annex E-6	
	Personnel
	1010011111

To enlighten DepEd employees on PNPKI concerns, ICTS-User Support Division will facilitate a **virtual orientation** on the subject matter on <u>07 November 2023</u> at 9:00 am to 12:00 noon via Microsoft Teams. A guest speaker from DICT will present and respond to queries/concerns that may be raised during the orientation.

The expected participants to the orientation will be DepEd personnel who will form part of the Regional and Division PNPKI Teams. Each region is instructed to have a maximum of ten (10) personnel (i.e., 5 from the Regional Office and 5 from various SDOs) to join the said orientation.

Prior to registering for the activity, the Regional ITOs (RITOs) must prepare a file containing the list of participants that will also attend the orientation and attach it in the online registration form thru this link: https://bit.ly/PNPKI2023OrientationRegistration on or before 06 November 2023 at 2:00 PM. Meeting links and other details will be sent directly to the identified participants.

Finally, all previous issuances pertaining to the subject matter are hereby rescinded. This decision is effective immediately and supersedes any prior communication on this topic. Please disregard any previous instructions or guidelines that may be in conflict with this announcement.

For more information, questions, and concerns on this subject, kindly send an email to support.pnpki@deped.gov.ph.

For immediate action and compliance.

ADDITIONAL INFORMATION ON PNPKI APPLICATION AND RELATED MATTERS

1. Application requirements

DepEd personnel shall only submit the softcopies of the following:

a. Completely accomplished PNPKI Application Forms (version 4, August 2022).

b. Certified PNPKI (P12) Bulk Application Data Form by their respective Personnel Officer then endorsed to the PNPKI Regional Office that has jurisdiction over their area.

• PNPKI materials (i.e., forms, samples, video tutorials, etc.) are available at the following link: https://bit.ly/DepEd-PNPKI2023. Access to the said link will only be possible when an official DepEd email account (*@deped.gov.ph) is used.

• DICT will not accept nor entertain printed and manually (written) accomplished forms.

2. Processing (Enrolling and Claiming)

- Upon submission of PNPKI requirements to the regional DICT-PNPKI Submission Channels (Annex C), DICT will evaluate the endorsed application forms that could take a few days to a few weeks since DepEd is not the only government organization to apply for digital certificates.
- Once cleared, the DICT-PNPKI team will send individual email notifications to applicants through their provided email accounts in the application form informing them that they passed the initial phase. Also, included in the email are instructions on how to Enroll for their digital certificates through a system that should only be accessed by the applicant. This will be the first (1st) of two (2) email notifications that he/she will receive from DICT.
- After successful enrollment, the second (2nd) email notification will be sent after a few days containing the subscriber's credentials as well as the instructions on how to Claim his/her digital certificate.

3. Utilization (Downloading and Installation)

 Following the process of claiming the digital certificate, it needs to be downloaded and installed onto the computer of the subscriber for eventual utilization. Refer to the same email on how to download or access this link: https://dict.gov.ph/pnpki-manuals/ for further guidance.

4. Validity of PNPKI digital certificates

- The PNPKI digital certificate is valid for two (2) years upon activation.
- When a DepEd employee is uncertain as to the status of his/her PNPKI digital certificate, the PNPKI Regional Focal Person (i.e., Regional ITO) can check with their respective DICT-PNPKI counterparts.
- Since the PNPKI digital certificate subscription is not renewable,
 DepEd employees must re-apply every two (2) years.
- When the PNPKI subscription is near its expiration, an email notification from DICT will be sent to the subscriber informing that his/her subscription will be **terminated in one (1) month**. At this time, the subscriber can now re-apply for a new subscription.

5. With existing PNPKI digital certificates

 For new DepEd employees that have an existing PNPKI digital certificate but were obtained outside DepEd, it is instructed that the said account be cancelled by undergoing a PNPKI revocation process before applying for a new account. Follow these steps:

a. The affected DepEd employee must secure a copy of the PNPKI Revocation Form from https://bit.ly/DepEd-PNPKI2023.

b. Fill out the form and submit it to the DepEd PNPKI Team for endorsement to the Regional DICT-PNPKI Support Team for appropriate action and wait for further instructions on the next steps to be taken.

NOTE:

Since DepEd's request for **Bulk Application for PNPKI Digital Certificates has been approved**, majority of the documentary requirements (including the mandatory online video interview) for identity verification of DepEd employees has been waived.

RESPONSIBILITIES OF PNPKI REGIONAL PROJECT MANAGEMENT TEAMS (RPMT)

The composition of the Regional and Division PNPKI Teams and their responsibilities are as follows:

1. Regional Directors

- a. Officially designated as the Project Sponsor of the Regional Project Management Team
- b. Responsibilities:
 - Oversee the activities, submit the weekly status of submissions to the PNPKI National Project Management Team (NPMT), and other related activities.
 - Ensure the security of handling accomplished PNPKI forms by issuing a Non-Disclosure Agreement (NDA) developed by the RO to be signed by all the PNPKI Team members.
 - Provide the support needed by the PNPKI Regional Project Management Team (RPMT).
 - May opt to add member/s to the RPMT as needed.
 - May provide directions on the manner of validation and submission within the region.

2. Regional Information Technology Officers (RITOs)

- a. Officially designated as the PNPKI Regional Focal Person and Project Manager (Team Leader) of the RPMT effective immediately.
- b. Responsibilities
 - In-charge of ensuring that all identified entities in this memorandum will be oriented to apply for their PNPKI-certified digital certificate.
 - Execute the directives of the Regional Director as to the procedure in validating and submission methods.
 - Coordinate with the DICT-PNPKI Cluster Team Office assigned in their respective regions.
 - May recommend adding member/s to the RPMT as needed.
 - Report to the National PMT the status of the number of applications transmitted to DICT.
 - Assist in resolving issues and concerns in relation to the activity.

3. Regional Administrative Officer Personnel

- a. Officially designated as RPMT members (Project team member) effective immediately.
- b. Responsibilities
 - Support and assist the Regional Focal Person in the execution of responsibilities.
 - Support and assist the RPMT within the Regional Office in resolving issues and concerns in relation to the activity.
 - Issue certification that the list of names appearing in the PNPKI Bulk Application Data Form are legitimate DepEd employees/personnel of their respective Regional Office.

4. Schools Division Superintendent

- a. Officially designated as the Project Sponsor for the SDOs Project Management Team.
- b. Responsibilities:
 - Carry out the instructions of the RPMT on the procedures of validation and submission of requirements.
 - Oversee the activities, submit the weekly status of submissions to the RPMT and other related activities.
 - Provide the support needed by the PNPKI Division Project Management Team (DPMT).
 - May opt to add member/s to the DPMT as needed.

5. Division Information Technology Officers (DITOs)

- a. Officially designated as RPMT member, Division Focal Person, and Division Project Manager effective immediately.
- b. Responsibilities
 - Assist the RPMT in coordinating and ensuring the cooperation of the whole division in achieving the objectives of the activity.
 - Perform directions of RPMT on the validation and submission of PNPKI requirements within the Division.
 - May opt to add member/s to the DPMT as needed.
 - Coordinate and assist the applicants on how to fill out the application form and other requirements.
 - Assist in resolving issues and concerns in relation to the activity.

6. Division Administrative Officer Personnel

- a. Officially designated as DPMT member effective immediately.
- b. Responsibilities:
 - Support and assist the DPMT Lead in the execution of responsibilities.
 - Issue certification that the list of names appearing in the PNPKI Bulk Application Data Form are legitimate DepEd employees/personnel of their respective SDOs or Public Elementary & Secondary Schools.
 - Assist in resolving issues and concerns in relation to the activity.

7. School Head

- a. Designated as Project Sponsor for the School's Project Management Team (SPMT) for PNPKI affairs.
- b. Responsibilities:
 - Oversee the activities, submit the weekly status of submissions to the DPMT.
 - May recommend members for the SPMT to the Division Project Manager then for approval of the Division Project Sponsor.
 - Provide the support needed by the designated SPMT in the school.
 - May opt to add member/s to the SPMT as needed.
 - Ensure the submission of PNPKI application forms of all School Personnel to the DPMT.

REGIONAL PNPKI SUBMISSION CHANNELS

Regions/Provinces Covered	Email Address
NCR	inio.pnpki@dict.gov.pii
CAR	car.pnpki@dict.gov.ph
Region 1	r1.pnpki@dict.gov.ph
Region 2	r2.pnpki@dict.gov.ph
Region 3	r3.pnpki@dict.gov.ph
Region 4A	r4a.pnpki@dict.gov.ph
MIMAROPA	r4b.pnpki@dict.gov.ph
	r5.pnpki@dict.gov.ph
Region 5	r6.pnpki@dict.gov.ph
Region 6 Region 7	r7.pnpki@dict.gov.ph
	r8.pnpki@dict.gov.ph
Region 8 Region 9	r9.pnpki@dict.gov.ph
Region 10	r10.pnpki@dict.gov.ph
Region 11	r11.pnpki@dict.gov.ph
Region 12	r12.pnpki@dict.gov.ph
Region 13	r13.pnpki@dict.gov.ph
NOTE: For BARMM MBHTE applicants, refer to the submit PNPKI Application Forms as well as Bulk Application Data Forms based on the l workstation.	details below on where to the certified PNPKI (P12)
BASULTA (Basilan, Sulu and Taw-Tawi)	basulta.pnpki@dict.gov.ph
Maguindanao and Lanao Del Sur	r12.pnpki@dict.gov.ph

THINGS TO CONSIDER WHEN FILLING-OUT THE PNPKI APPLICATION FORM

Due to the need for consistency in the responses in the PNPKI Application Form, below are some instructions on what to do and/or specify in the said form.

1. The PNPKI Application Form is "fillable"

- a. Download and install the PDF file reader application software on the computer to open the PNPKI Application Form (Ex. Adobe Reader, etc.).
- b. Upon opening the file, click on the **text fields** (blue colored boxes) to start typing in the information requested. Said fields automatically adjust for lengthier details.

c. Put a check mark on the following check boxes by clicking on it.

2. CERTI	FICATE TYPE	3. METHOD OF ACTIVATION	
2A 🗸	Signing	3A Online Download	
2B 🗸	Authentication	3A Online Download	

2. Required fields.

- a. Text fields that require important information are marked with asterisks partnered with text boxes with red borders.
- b. Fill out the **Date** and **Place** fields on pages 2 & 4 of the application form.

3. Not Applicable Items

- a. For items that are **not applicable** to the applicant, **leave the text field** blank.
- b. Do not put N/A, NA or a dash (-) symbol if the item is not applicable.

4. Profile Photo

- a. Attach the image file (softcopy) of the photo.
- b. The image should be clear and sharp.
- c. With light-colored and plain background
- d. Not cropped from other pictures with other visible objects
- e. Not "grainy", blurred and/or stretched.
- f. Taken within the last 6 months, and
- g. Able to occupy most of the space allocated in the application form.

5. Electronic Signature

- a. Attach an image file of the electronic signature which is clear & visible.
- b. Use JPEG or PDF format.
- c. Attach the same image file on page 4 of the PNPKI Application Form.

Organization and Organizational Unit/Department/Division (Items 40* & 4P*)

For these sections, please refer to the table below on what to indicate in the previously mentioned fields. Abbreviations will only be accepted when the space provided is not sufficient, but make sure that these are commonly used and easily understood acronyms by DepEd personnel from all governance levels.

Regional Representations to be indicated in Item 40* (Organization):

Regions	To be indicated in the PNPKI Application Form:
National Capital Region	NCR
Cordillera Administrative Region	CAR
Region 1	Region I
Region 2	Region II
Region 3	Region III
Region 4A	Region IV-A
MIMAROPA	MIMAROPA
Region 5	Region V
Region 6	Region VI
Region 7	Region VII
Region 8	Region VIII
Region 9	Region IX
Region 10	Region X
Region 11	Region XI
Region 12	Region XII
Region 13 (CARAGA)	CARAGA
Bangsamoro Autonomous Region of Muslim Mindanao Ministry of Basic, Higher and Technical Education	BARMM MBHTE

DepEd Field Units

- 1. For Regional Office Personnel
 - For 40 (Organization) DEPARTMENT OF EDUCATION (REGION REPRESENTED)
 - For 4P (Organizational Unit/Department/Division) –

(COMPLETE ASSIGNED WORKSTATION)

Example:

40° Organization / Agency / Company	DEPARTMENT OF EDUCATION-NCR	
4P* Organizational Unit / Department / Divis	OFFICE OF THE REGIONAL DIRECTOR-ICT UNIT	

2. For Schools Division Office (SDO) Personnel

- For 40 (Organization) DEPARTMENT OF EDUCATION (REGION REPRESENTED)
- For 4P (Organizational Unit/Department/Division) -

(SDO Represented) - (Complete Assigned Workstation)

Example:

40* Organization / Agency / Company DEPA	RTMENT OF EDUCATION-NCR
4P* Organizational Unit / Department / Division	SDO QUEZON CITY - OFFICE OF THE SCHOOLS DIVISION SUPERINTENDENT

3. For Public Elementary and Secondary Schools Personnel

- For 40 (Organization) DEPARTMENT OF EDUCATION (REGION REPRESENTED)
- For 4P (Organizational Unit/Department/Division) -

(SDO Represented) - (Currently Assigned School [School ID])

Example:

40° Organization / Agency / Company	DEPARTMENT OF EDUCATION-NCR
4P* Organizational Unit / Department / Division	SDO QUEZON CITY - NORTH FAIRVIEW ES (123456)

NOTE:

For SDOs and Public Elementary and Secondary Schools, please ensure that you have indicated if the SDO is a province or a city to avoid confusion.

Example:

SDO Cebu Province

SDO Cebu City

PHILIPPINE NATIONAL PKI

APPLICATION FOR DIGITAL CERTIFICATE

Application ID Number (For Official Use only)

Instructions:

- 1. Please fill the form in BLOCK LETTERS ONLY.
- 2. Required fields are marked WiTH AN ASTERISK (*).
- 3. Present one (1) copy and the original documents to our Registration Authority for verification and attestation.
- 4. Any information that is not verified shall not be included in certificates.
- 5. Any discrepancy or inconsistency in the form will lead to delay and/or rejection.
- 6. Put a CHECK ON THE BOX that corresponds to your answer.
- 7. Do NOT INPUT ABBREVIATED information or ACRONYMS.



1. CERTIFICATE CLASS		2. CERTIFICATE	TYPE		3. METHOD O	FACTIVATION
1A Individual		2A Signing 2B Authen) tication		3A Onl	ine Download
		4. APPLIC	ANT'S DET	AILS		
4A* Last Name	4B* I	First Name		4C* Middle	e Name	4D* Name Extension (JR/SR/III)
DELA CRUZ		AN		PABLO	1	
4E* Gender Male ✓	Fema.	** Nationality	FILIPI	NO 4	G* Date of DD/MM/YYYY)	Birth 23/01/2000
4H* TIN 123-456-78	39		41 SSS No.			
4J GSIS No.	41	Philhealth			4L Pag-ibig No.	
4M CRN No.		4N O' of IDs pres	sented during fa	ice to face veri	lication	
4O* Organization / Agency	/ Company	DEP. P. ME	A OF E	DUCATIO	N-NCR	
4P* Organizational Unit / D	Department / Division	on C 1	TI	HE REGIO	ONAL DIREC	CTOR-ICT UNIT
4Q Marital Status	Single Married	Widow	Y			
4R Employment Status	Working	Student Self-en	nployed U	nemployed	Senior Citizen	
Lasi	t Name	First Name	Middle	N THE	Name Extension (JR/SR/III)	Birthdate Living / De- (DD/MM/YYYY) ceased
4S Spouse Name						
4T Mother's Maiden Name				*		
4U Father's Name						
	Turk t	5. CON	TACT DETAI	LS		
		Reside	ential Addres	is		
5A* Unit/Room/House No.	. 1234		5B	* Street	ILOVE	OU STREET
5C* Barangay BA	ARANGAY N	ORTH FAIRV	IEW 5D	* Municipality	//City	QUEZON CITY
5E* Province MI	ETRO MANIL	.A	5F	* Zip Code	1100	
5G Landline No.			5H	Mobile No.	639999	999999
5I* Official Work Email Ad	dress juan.del	a_cruz@deped.g	ov.ph *P	NPKI-related	emails will be ser	nt to this email address
		Ofti	ce Address	<u> </u>		 .
5K Unit/Room/Floor No.			5L	Building		
5M Street			5N	Barangay		
50 Municipality/City			5P	Province		
5Q Zip Code			5A	Landline No	· _	
		PNPKI R	A Form 2018	-01A		

Version 4 Date Revised August 2022



6. DECLARATION	
I hereby agree that I have read and understood the provisions of the Subscriber's Agreement; to submitted in relation to this application is true and correct to the best of my knowledge; that I at that I consent to the subscriber agreement and will abide by the same; that I accept the publication.	m duly authorized to make this application;
I authorize and expressly give consent to the National PKI through its authorized representative whatever source it deems appropriate.	ve(s) to verify my personal information from
Date: 11 SEPTEMBER 2023 Place: DEPED, PASIG CITY Name of Applicant:	DELA CRUZ, JUAN
Signature:	Juan Dela Cruz
7. CHECKLIST OF DOCUMENTS TO BE SUBMITTED ALONG WITH	THE APPLICATION
Present the ff. original documents with photocopy to our Registration Authority to	or verification and attestation
Required Documents:	
Philippine National ID (PhilID) only	
In the absence of National ID (PhilID), provide any two (2) of the following Documents or	r ID's:
Birth certificate OR valid Passport	
Unified in Trypose Identification Card (UMID) Compliant Card	
Alies centical of Registration (ACR) card for foreigners	
In the absence UMID Compliant card, any two (2) of the following cards are allowed as	s valid ID's:
LTO Driver 3 to te	
Professional Regal Lion Countission (PRC) ID	
National Bureau of In acting (Clearance	
Police Clearance Certificate	
Postal Identity Card	
COMELEC Voter's ID	
Government Service Insurance System (GLS) e-Card	
Government Office and GOCC ID, e.g. Aread Forces of the Philippines (AFP ID), Home	e Development Mutual Fund (HDMF)
Social Security System (SSS) Card	
Senior Citizen Card	
Certification from the National Council for the Welfare vi Disabled Persons (NCWDP)	
Overseas Workers Welfare Administration (OWWA) ID / Overseas Filiping Worker (OFW	V) ID
Seaman's Book	
Alien Certification of Registration/Immigrant Certificate of Registrati	
Integrated Bar Of The Philippines ID	
Department of Social Welfare and Development (DSWD) Certification	~ _
Company IDs Issued by Private Entities or Institutions Registered with or Superiored or	r Figurated either by the BSP, SEC, or IC
8. DISCLAIMER	
The collected personal information is utilized solely for documentation and processing purpos any outside parties, in accordance with the Data Privacy Act of 2012.	se within the DIGT and is not shared with
TO BE FILLED BY RA OFFICE ONLY	
I declare that the applicant has provided correct information in this application form. I have che supporting documents.	ecked and verified the application form and
RA Code: Name:	
Signature:	RA Seal and
Date: 11 SEPTEMBER 2023 Place: DEPED, PASIG CITY	Stamp

THIS FORM IS NOT FOR SALE



SUBSCRIBER AGREEMENT

PLEASE READ THIS AGREEMENT CAREFULLY BEFORE USING THE DIGITAL CERTIFICATE ISSUED TO YOU OR YOUR ORGANIZATION. BY APPLYING FOR A DIGITAL CERTIFICATE, YOU ARE AGREEING TO BE BOUND BY THE TERMS OF THIS AGREEMENT. IF YOU HAVE PROBLEMS UNDERSTANDING THIS AGREEMENT, E-MAIL US AT support.pnpki@dict.gov.ph.

1.0 Definitions

Applicant: The individual that applies for (or seeks renewal of) a Digital Certificate naming it as the "Subject".

Certification Practice Statement (CPS) - A statement of the practices that a certification authority employs in issuing, managing, revoking, and renewing or re-keying certificates.

Certificate Policy (CP) - A named set of rules that indicate s the applicability of a certificate to a particular community and/or class of application with common security requirements. For example, a particular CP might indicate applicability of a type of certificate to the authentication of parties engaging in business-to-business transactions for the trading ofgoods or services within a given price range.

Certificate Revocation List ("CRL") - A collection of electronic data containing the list of serial numbers revoked or suspended by the Certificate Authority

Online Certificate Status Protocol ("OCSP") - An Internet Protocol (IP) used to obtain the real time revocation status of a digital certificate. It is used as an online faster alternative to CRL list.

Public Kee - I madematical key which is available publicly and which is used to verify Digital Signatures created with the matched Feeta Key and to encrypt electronic data which can only be decrypted using the matched Private Key

Private Key - A province likely which is kept private to the owner and which is used to create Digital Signatures or to decrypt electronic data

Registration Authority (P. 1) An actity that is responsible for one or more of the following functions: the identification and authentication of certificate applications, initiating certificate revocations or suspensions under certain course in special s

Subscriber - A subject of a certificate who issued a certificate.

2.0 Authority to Use Digital Certificates

- 2.1 Grant of Authority As from the Effective Date up to validity period of any issued Digital Certificate ("Valid from" date to "Valid to" date), PNPKI grants to the Subscriber the authority to use the requested Digital Certificate in conjunction with Private Key and/or Public Key operations. The obligations of the subscriber (see section 4.0) with respect to Private Key protection are applicable from the effective date.
- 2.2 Limitations on Authority The digital certificate cannot be use for parposes other than what is allowed in this Subscriber Agreement and the CPS.

3.0 Use of PNPKI Digital Certificate

The subscriber shall use the certificate for its lawful and intended use by. The certificate shall be used in accordance with its Key-Usage field extensions. All issued certificate by PNPKI cannot be used for process other than what is allowed in this subscriber agreement and by the CPS. PNPKI shall not be liable for any claim, arising from prohibited use.

3.1 Acceptance of a Digital Certificate

The following conduct constitutes certificate acceptance:

- a) A certificate shall be deemed accepted when it is in the subscriber or representative control
- b) Failure of the subscriber to object to the certificate or its content within five (5) calendar days; or
- c) The subscriber uses the certificate.

3.2 Revocation of Digital Certificates

A certificate shall be revoked when the bind between the subject and the subject's public key is no longer valid. An end-user subscriber certificate can be requested for revocation under any of the following conditions:

- a) When a verified request for revocation is received by PNPKI CA or RA;
- b) When any of the information found in the certificate is changed or no longer applicable;
- c) When the Private Key, or the media holding the Private Key, associated with the certificate is compromised;
- d) When the PNPKI CA determines that the end-user entity is no longer complying with the requirements of by the CPS and this subscriber agreement; or
- e) When the PNPKI CA has the reason to believe that the certificate was issued in a manner that is not in accordance with the procedures required by the CPS and this subscriber agreement.
- f) When subscriber requested revocation of the Certificate:



4.0 Subscriber Obligations

This Agreement governs the subscriber's application for, acceptance, and use of, a digital certificate issued by the RA.

- The provisions of the Root CA CP/CPS, GovCA CP/CPS, and other pertinent documents are binding upon the subscriber.
- b) All the information provided in the digital certificate application form is true and correct.
- c) The use of the digital certificate shall be for the sole use of the subscriber.
- d) The subscriber will not, under any circumstances, allow any other person to use the digital certificate. Any such use by another person constitutes a compromise of the associated private key, requiring the revocation of the digital certificate.
- e) The subscriber shall protect the confidentiality of the private key associated with his or her digital certificate as well as any PIN number or other means used to activate the private key.
- f) The subscriber shall remain solely responsible for the maintenance of the confidentiality of the certificate.
- g) The subscriber shall not use the digital certificate for any unlawful purpose, or for any purpose that does not have anything to do with accessing the PKI information systems or transactions using the digital certificates.
- h) The subscriber shall promptly request the RA to revoke the digital certificate upon knowing or suspecting inaccurate information, ass, exposure or compromise of the associated private key.
- i) The sub- rit er shall not tamper, interfere with, or reverse-engineer any technical implementation of the digital certin. For its up or in any manner seek to compromise the security provided by the RA and the National PKI system.
- j) The subscriber a cepts to risk of an undetected compromised digital certificate or associated private key, which may be used to special ate the said subscriber.

5.0 Permission to Publis, June 110

The Subscriber agrees that PN-KI m., put ish the serial number of the Subscriber's Digital Certificate in connection with PNPKI's dissemination of CRL's a 20.35

6.0 Disclaimer

PNPKI shall not be liable for any claims are ag from probibited use of Digital Certificates issued by GovCA. PNPKI will not be liable if the user has not respected his obligations mentioned in the CPS and in this agreement.

7.0 Term and Termination

This agreement shall terminate upon

- a) The expiry date of any Digital Certificate issued to the Subscriber
- b) Any failure to comply with any of the subscriber obligations partion of in this Subscriber Agreement

8.0 Effect of termination

Upon termination of this Subscriber Agreement for any reason, PNPKI may to bke the Subscriber's Digital Certificate in accordance with PNPKI revocation procedures.

9.0 CP and CPS Information

The digital certificate contains information provided by the subscriber, which is a thenticated by the RA in accordance with the requirements set out in the CA CP and CPS, available for viewing and down, as at dig govern/pnpki/.

Date:	11 SEPTEMBER 2023	Place:	DEPED, PASIG CITY	Name of Applicant:	DELA CRUZ, JUAN
				Signature:	Juan Dela Cruz

(Please sign in the presence of an administering officer)



PHILIPPINE NATIONAL PKI

APPLICATION FOR DIGITAL CERTIFICATE

Application ID Number (For Official Use only)

Instructions:

- 1. Please fill the form in BLOCK LETTERS ONLY.
- 2. Required fields are marked WITH AN ASTERISK (*).
- 3. Present one (1) copy and the original documents to our Registration Authority for verification and attestation.
- 4. Any information that is not verified shall not be included in certificates.
- Any discrepancy or inconsistency in the form will lead to delay and/or rejection
- 6. Put a CHECK ON THE BOX that corresponds to your answer.
- 7. Do NOT INPUT ABBREVIATED information or ACRONYMS.



1, CERTIFICATE CLASS	2. CERTIFICATE TYPE	3. METHOD OF ACTIVATION
1A Individual	2A Signing 2B Authentication	3A Online Download
	4. APPLICANT'S DETAIL	
4A* Last Name	4B* First Name	4C* Middle Name
DELA CRUZ	JUAN	PABLO
4E* Gender Male ✓ Fema	FILIPINO FILIPINO	O 4G* Date of Birth 23/01/2000 (DD/MM/YYYY)
4H* TIN 123-456-789	41 SSS No.	
4J GSIS No.	4K Philhealth	4L Pag-ibig No.
4M CRN No.	4N Of er IDs presented during face	to face verification
4O* Organization / Agency / Company	DEPARAME TOF EDU	CATION-NCR
4P* Organizational Unit / Department /	Division State CITY - O	FFICE OF THE SCHOOLS DIVISION SUPERINTENDENT
4Q Marital Status Single Ma	arried Widow	
4R Employment Status Workin	ng Student Self-employed Uner	mployed Senior Citizen
Last Name	First Name Middle N	Name Birthdate Living / De- Extension (JR/SR/III) Birthdate ceased
4S Spouse Name		
4T Mother's Maiden Name		
4U Father's Name		
	5. CONTACT DETAILS	
	Residential Address	
5A* Unit/Room/House No. 12	234 5B* St	treet I LOVE OU STREET
5C* Barangay BARANGA	Y NORTH FAIRVIEW 5D* M	unicipality/City QUEZON CITY
5E* Province METRO MA	ANILA 5F* Zi	p Code 1100
5G Landline No.	5H* M	obile No. 63999999999
5l* Official Work Email Address jua	an.dela_cruz@deped.gov.ph * PNPI	KI-related emails will be sent to this email address
	Office Address	
5K Unit/Room/Floor No.	5L Bui	ilding
5M Street	5N Ba	ırangay
5O Municipality/City	5P Pro	ovince
5Q Zip Code	5R La	ndline No.
	PNPKI BA Form 2018-01-	Λ

Version 4 Date Revised August 2022



Annex E-3 (FOR DEPED PUBLIC ELEMENTARY & SECONDARY SCHOOL PERSONNEL)

PHILIPPINE NATIONAL PKI

		APPLICATION FOR D	IGITAL CERTIFICATE	=	
Applic	ation ID Number (For 0	Official Use only)			
 Required f Present or Authority f Any inform Any discrerejection. Put a CHE 	fields are marked to the (1) copy and the corverification and nation that is not verpancy or inconsisted.	attestation. erified shall not be	its to our Registration included in certificates. ill lead to delay and/or o your answer.		
1. CERTIFICATE CLA	iss	2. CERTIFICATE TY	PE 3. METHOD OF ACTIVATION		
1A Individual	>	2A Signing 2B Authentica	tion 3A Online Download		
		4. APPLICA	IT'S DETAILS		
4A* Last Name	4B*	First Name	4C* Middle Name 4D* Name Extension (JR/SR/III)		
DELA CRUZ		<u>A</u> N	PABLO	-	
	le Fema	** Nationality	FILIPINO 4G* Date of Birth 23/01/2000 (DD/MM/YYYY)		
4H* TIN 123-456	6-789	41	SSS No.	T	
4J GSIS No.	4	K Philhealth	4L Pag-ibig No.	广	
4M CRN No.		4N O' of IDs present	ed during face to face verification	Ь.	
40* Organization / Ag	jency / Company	DEPARAME!	OF EDUCATION-NCR		
4P* Organizational Ur	nit / Department / Divis	ion S J	ZON CITY - NORTH FAIRVIEW ES (123456)		
4Q Marital Status	Single Married	Widow	·		
4R Employment Statu	ıs Working	Student Self-emplo	yed Unemployed Senior Citizen		
	Last Name	First Name	Middle Name Birthdate Living / De- extension (JP/SR/ill) Birthdate Code Ceased Code Ceased Code Code		
4S Spouse Name					
4T Mother's Maiden Name				<u> </u>	
4U Father's Name				<u> </u>	
			T DETAILS		
		Residenti	al Address	\neg	
5A* Unit/Room/Hous		ODT(E A E \ " = \ .	58* Street I LOVE OU STREET	\dashv	
5C* Barangay	 	ORTH FAIRVIEW		\dashv	
5E* Province 5G Landline No.	METRO MANIL	_^	5F* Zip Code 1100 5H* Mobile No. 639999999999	\dashv	
	il Address liver de	ia cruz@dened.cov			
51* Official Work Email Address juan.dela_cruz@deped.gov.ph * PNPKI-related emails will be sent to this email address Office Address					
5K Unit/Room/Floor I	No.		5L Building	\neg	
5M Street			5N Barangay	十	
50 Municipality/City		 	5P Province	十	
5Q Zip Code			5R Landline No.	十	
PNPKI RA Form 2018-01A					
		Version 4 Date Ro	evised August 2022		

FOR BARMM MBHTE UNITS:

1. For BARMM MBHTE Regional Office Personnel

- For 40 (Organization) DEPARTMENT OF EDUCATION BARMM MBHTE
- For 4P (Organizational Unit/Department/Division) -

(COMPLETE ASSIGNED WORKSTATION)

Example:

4O* Organization / Agency / Company	DEPARTAMENT OF SOUCATION BANK IN BARTE
4P* Organizational Unit / Department / Divisio	OFFICE OF THE CONTROL OF STATE

2. For Schools Division Office (SDO) Personnel

- For 4O (Organization) DEPARTMENT OF EDUCATION BARMM MBHTE
- For 4P (Organizational Unit/Department/Division) -

(SDO Represented) - (Complete Assigned Workstation)

Example:

40° Organization / Agency / Company	DEPARTIMENT OF EDUCATION HEARING HABITHE
4P* Organizational Unit / Department / Divisi	ou নিমেই প্রেম্প্র প্রমের বিষয়ের প্রমের পর বিষয়ের প্রমের পর বিষয়ের পর

3. For Public Elementary and Secondary Schools Personnel

- For 4O (Organization) DEPARTMENT OF EDUCATION BARMM MBHTE
- For 4P (Organizational Unit/Department/Division) –

(SDO Represented) - (Currently Assigned School [School ID])

Example:

40° Organization / Agency / Company	DEPARTAMENTO EDUCATION SARIMMIMISTRE
4P* Organizational Unit / Department / Division	DOGUTA = SKABABARIL (EQ (USIKA)

Philippine National PKI

APPLICATION FOR DIGITAL CERTIFICATE

Application ID Number (For Official Use only)

Instructions:

- 1. Please fill the form in BLOCK LETTERS ONLY.
- 2. Required fields are marked WITH AN ASTERISK (*).
- 3. Present one (1) copy and the original documents to our Registration Authority for verification and attestation.
- 4. Any information that is not verified shall not be included in certificates.
- 5. Any discrepancy or inconsistency in the form will lead to delay and/or
- 6. Put a CHECK ON THE BOX that corresponds to your answer.
 7. Do NOT INPUT ABBREVIATED information or ACRONYMS.



1. CERTIFICATE CLASS 2. CERTIFICATE TYPE							3	3. METHOD OF ACTIVATION						
1A Individual 2A Signing 2B Authentication						1	3A Online Download							
4. APPLICANT'S DETAILS														
4A* Last Name	V	4B* I	First Name				4C* Midd	ddle Name 4D* Name Extension (JR/SR/III)						
DELA CRUZ		JU	AN			PABLO								
4E* Gender Ma	le ✓ Fema		FILIPINO			10	4G* Date of Birth (DD/MM/YYYY) 23/01/2000]			
4H* TIN 123-45	6-789		O		41 888	S No.	No.							
4J GSIS No.		41	Philhealth					1	Pag-ibig No		Ш			
4M CRN No.			4N O	IDs prese	ented di	uring fac	e to face ve	rificati	оп					
40* Organization / Ag	gency / Comp	any	DEP	P.ME			UCATIO	_						
4P* Organizational U	nit / Departm	ent / Divisi	on	S 2	Jr.	ZON	CITY -	NOF	RTH FAIR	VIE	W ES	(123	456)	
4Q Marital Status	Single	Married	Widow											
4R Employment Statu	us V	Vorking	Student	Self-em	ployed	Un	employed	∐s	enior Citizen					
Last Name			First Name Mi		fiddle N	Name Extension (JR/SR/III)		Birthdate Living / De- (DD/MM/YYYY) ceased						
4S Spouse Name														
4T Mother's Maiden Name														
4U Father's Name	4U Father's Name				$\Box \Gamma$									
		eren er Listen er		5. CONT	ACT E	DETAIL	S	:						
				Reside	ntial A	ddres	3			Ł				_
5A* Unit/Room/Hous	e No.	1234				5B*	Street	I LOVE OU STREET				_		
5C* Barangay	BARAN	GAY NO	ORTH F	AIRVIE	W	5D*	5D* Municipality/City QUEZON CITY				<u> </u>			
5E* Province METRO MANILA						5 F *	Zip Code		1100					
5G Landline No.					5H*	1* Mobile No. 63999999999								
51* Official Work Email Address juan.dela_cruz@deped.gov.ph				* PNPKI-related emails will be sent to this email address										
Office Address														
5K Unit/Room/Floor No.					5L E	Building		<u> </u>					_	
5M Street				5N I	Barangay						_			
5O Municipality/City				5P I	Province							_		
5Q Zip Code	5Q Zip Code				5R Landline No.					╝				
}			F	NPKI RA	Form	2018-0)1A							

Version 4 Date Revised August 2022



6. DECLARATION										
I hereby agree that I have read and understood the provisions of the Subscriber 's Agreement; that all information provided and documents submitted in relation to this application is true and correct to the best of my knowledge; that I am duly authorized to make this application; that I consent to the subscriber agreement and will abide by the same; that I accept the publication of my certificate information.										
I authorize and expressly give consent to the National PKI through its authorized representative(s) to verify my personal information from whatever source it deems appropriate.										
Date: 11 SEPTEMBER 2023 Place: DEPED, PASIG CITY Name of Applicant: DELA CRUZ, JUAN										
Juan Dela Cruz										
7. CHECKLIST OF DOCUMENTS TO BE SUBMITTED ALONG WITH THE APPLICATION										
Present the ff. original documents with photocopy to our Registration Authority for verification and attestation										
Required Documents:										
Philippine National ID (PhilID) only										
In the absence of National ID (PhilID), provide any two (2) of the following Documents or ID's:										
Birth certificate OR valid Passport										
Unified Nation (pose Identification Card (UMID) Compliant Card										
Alies Centification (ACR) card for foreigners										
In the absence UMID Compliant card, any two (2) of the following cards are allowed as valid ID's:										
LTO Driver's the re										
Professional Regulation Countission (PRC) ID										
National Bureau of In action (AHO) ID										
Police Clearance Certificate										
Postal Identity Card										
COMELEC Voter's ID										
Government Service Insurance System (GLS) e-Card										
Government Office and GOCC ID, e.g. An ad Forces of the Philippines (AFP ID), Home Development Mutual Fund (HDMF)										
Social Security System (SSS) Card										
Senior Citizen Card										
Certification from the National Council for the Welfare of Disabled Persons (NCWDP)										
Overseas Workers Welfare Administration (OWWA) ID / Overseas Filiping Worker (OFW) ID										
Seaman's Book										
Alien Certification of Registration/Immigrant Certificate of Registration										
Integrated Bar Of The Philippines ID										
Department of Social Welfare and Development (DSWD) Certification										
Company IDs Issued by Private Entities or Institutions Registered with or Supervised or Produkted either by the BSP, SEC, or IC										
8. DISCLAIMER										
The collected personal information is utilized solely for documentation and processing purpose within the DIST and is not shared with any outside parties, in accordance with the Data Privacy Act of 2012.										
TO BE FILLED BY RA OFFICE ONLY										
I declare that the applicant has provided correct information in this application form. I have checked and verified the application form and supporting documents.										
RA Code: Name:										
Signature: RA Seal and										
Date: 11 SEPTEMBER 2023 Place: DEPED, PASIG CITY Stamp										
ENGLISHMENT										

THIS FORM IS NOT FOR SALE



SUBSCRIBER AGREEMENT

PLEASE READ THIS AGREEMENT CAREFULLY BEFORE USING THE DIGITAL CERTIFICATE ISSUED TO YOU OR YOUR ORGANIZATION. BY APPLYING FOR A DIGITAL CERTIFICATE, YOU ARE AGREEING TO BE BOUND BY THE TERMS OF THIS AGREEMENT. IF YOU HAVE PROBLEMS UNDERSTANDING THIS AGREEMENT, E-MAIL US AT support.pnpki@dict.gov.ph.

1.0 Definitions

Applicant: The individual that applies for (or seeks renewal of) a Digital Certificate naming it as the "Subject".

Certification Practice Statement (CPS) - A statement of the practices that a certification authority employs in issuing, managing, revoking, and renewing or re-keying certificates.

Certificate Policy (CP) - A named set of rules that indicate s the applicability of a certificate to a particular community and/or class of application with common security requirements. For example, a particular CP might indicate applicability of a type of certificate to the authentication of parties engaging in business-to-business transactions for the trading ofgoods or services within a given price range.

Certificate Revocation List ("CRL") - A collection of electronic data containing the list of serial numbers revoked or suspended by the Certificate Authority

Online Certificate Status Protocol ("OCSP") - An Internet Protocol (IP) used to obtain the real time revocation status of a digital certificate It is used as an online faster alternative to CRL list.

Public Ker - A markematical key which is available publicly and which is used to verify Digital Signatures created with the matched F vata Key and to encrypt electronic data which can only be decrypted using the matched Private Key

Private Key - A control key which is kept private to the owner and which is used to create Digital Signatures or to decrypt electronic data.

Registration Authority (Fig.) Applicitly that is responsible for one or more of the following functions: the identification and authentication of certificate applications, initiating certificate revocations or suspensions under certain accums that is, processing subscriber requests to revoke or suspend their certificates, and approving or rejecting requests by a secreers to renew or re-key their certificates. RAs, however, do not sign or issue certificates (i.e., an RA is delegate scenarious to behalf of a CA).

Subscriber - A subject of a certificate who issued a certificate.

2.0 Authority to Use Digital Certificates

- 2.1 Grant of Authority As from the Effective Date of Validity period of any issued Digital Certificate ("Valid from" date to "Valid to" date), PNPKI grants to the Subscriber the authority to use the requested Digital Certificate in conjunction with Private Key and/or Public Key operations. The outgations of the subscriber (see section 4.0) with respect to Private Key protection are applicable from the effective date.
- 2.2 Limitations on Authority The digital certificate cannot be use for parposes other than what is allowed in this Subscriber Agreement and the CPS.

3.0 Use of PNPKI Digital Certificate

The subscriber shall use the certificate for its lawful and intended use **v**. The certificate shall be used in accordance with its Key-Usage field extensions. All issued certificate by PNPKI cannot be used for reconstruction of the subscriber agreement and by the CPS. PNPKI shall not be liable for any claim, arising from prohibited use.

3.1 Acceptance of a Digital Certificate

The following conduct constitutes certificate acceptance:

- a) A certificate shall be deemed accepted when it is in the subscriber or representative control
- b) Failure of the subscriber to object to the certificate or its content within five (5) calendar days; or
- c) The subscriber uses the certificate.

3.2 Revocation of Digital Certificates

A certificate shall be revoked when the bind between the subject and the subject's public key is no longer valid. An end-user subscriber certificate can be requested for revocation under any of the following conditions:

- a) When a verified request for revocation is received by PNPKI CA or RA;
- b) When any of the information found in the certificate is changed or no longer applicable;
- c) When the Private Key, or the media holding the Private Key, associated with the certificate is compromised;
- d) When the PNPKI CA determines that the end-user entity is no longer complying with the requirements of by the CPS and this subscriber agreement; or
- e) When the PNPKI CA has the reason to believe that the certificate was issued in a manner that is not in accordance with the procedures required by the CPS and this subscriber agreement.
- f) When subscriber requested revocation of the Certificate;



4.0 Subscriber Obligations

This Agreement governs the subscriber's application for, acceptance, and use of, a digital certificate issued by the RA.

- The provisions of the Root CA CP/CPS, GovCA CP/CPS, and other pertinent documents are binding upon the subscriber.
- b) All the information provided in the digital certificate application form is true and correct.
- c) The use of the digital certificate shall be for the sole use of the subscriber.
- d) The subscriber will not, under any circumstances, allow any other person to use the digital certificate. Any such use by another person constitutes a compromise of the associated private key, requiring the revocation of the digital certificate.
- The subscriber shall protect the confidentiality of the private key associated with his or her digital certificate as well
 as any PIN number or other means used to activate the private key.
- f) The subscriber shall remain solely responsible for the maintenance of the confidentiality of the certificate.
- g) The subscriber shall not use the digital certificate for any unlawful purpose, or for any purpose that does not have anything to do with accessing the PKI information systems or transactions using the digital certificates.
- h) The subscriber shall promptly request the RA to revoke the digital certificate upon knowing or suspecting inaccurate information, ass, exposure or compromise of the associated private key.
- i) The sub triver shall not tamper, interfere with, or reverse-engineer any technical implementation of the digital certificate or its up or in any manner seek to compromise the security provided by the RA and the National PKI system.
- j) The subscriber a cepts or risk of an undetected compromised digital certificate or associated private key, which may be used to specify ate the said subscriber.

5.0 Permission to Publis, Januar atto

The Subscriber agrees that PN KI m., put ish the serial number of the Subscriber's Digital Certificate in connection with PNPKI's dissemination of CRL's a Connection with PNPKI's dissemination of CRL's a Connection with

6.0 Disclaimer

PNPKI shall not be liable for any claims are ng from prehibited use of Digital Certificates issued by GovCA. PNPKI will not be liable if the user has not respected his obligations men used in the CPS and in this agreement.

7.0 Term and Termination

This agreement shall terminate upon

- a) The expiry date of any Digital Certificate issued to the Subscriber
- b) Any failure to comply with any of the subscriber obligations pention of in this Subscriber Agreement

8.0 Effect of termination

Upon termination of this Subscriber Agreement for any reason, PNPKI may to bk the Subscriber's Digital Certificate in accordance with PNPKI revocation procedures.

9.0 CP and CPS Information

The digital certificate contains information provided by the subscriber, which is a thenticated by the RA in accordance with the requirements set out in the CA CP and CPS, available for viewing and down, as at dig (goxph/pnpki/.

Date:	11 SEPTEMBER 2023	Place:	DEPED, PASIG CITY	Name of Applicant:	DELACRUZ, JUAN
				Signature:	Juan Dela Cruz

(Please sign in the presence of an administering officer)



hilippine National PK] **APPLICATION FOR DIGITAL CERTIFICATE** Application ID Number (For Official Use only) Instructions: 1. Please fill the form in BLOCK LETTERS ONLY. 2. Required fields are marked WITH AN ASTERISK (*). 3. Present one (1) copy and the original documents to our Registration Authority for verification and attestation. 4. Any information that is not verified shall not be included in certificates. 5. Any discrepancy or inconsistency in the form will lead to delay and/or 6. Put a CHECK ON THE BOX that corresponds to your answer. Do NOT INPUT ABBREVIATED information or ACRONYMS. 1. CERTIFICATE CLASS 2. CERTIFICATE TYPE 3. METHOD OF ACTIVATION 1A Individual 3A 🗸 Online Download 2B Authentication 4. APPLICANT'S DETAILS 4A* Last Name 4B* First Name 4C* Middle Name 4D* Name Extension (JR/SR/III) DELA CRUZ IPABLO 4E* Gender 23/01/2000 Nationality İFILIPINO Date of (DD/MM/YYYY) 4H* TIN 123-456-789 4I SSS No. Philhealth 4J GSIS No. 4L Pag-ibig No. Ds presented during face to face verification 4M CRN No. 40* Organization / Agency / Company F EDUCATION-NCR 4P* Organizational Unit / Department / Division ZON CITY - NORTH FAIRVIEW ES (123456) 4Q Marital Status Widow Single Married 4R Employment Status Working Senior Citizen Student Self-employed Unemployed Last Name First Name Middle: **Birthdate** Living / De-Name (DD/MM/Y) Extension ceased (JR/SR/III) 4S Spouse Name 4T Mother's Maiden Name 4U Father's Name 5. CONTACT DETAILS Residential Address 1234 5A* Unit/Room/House No. 5B* Street LOVE OU STREET 5C* Barangay BARANGAY NORTH FAIRVIEW 5D* Municipality/City **QUEZON CITY** 1100 5E* Province METRO MANILA 5F* Zip Code 5G Landline No. 5H* Mobile No. 1639999999999 51° Official Work Email Address juan.dela_cruz@deped.gov.ph * PNPKI-related emails will be sent to this email address Office Address 5K Unit/Room/Floor No. 5L Building 5M Street 5N Barangay 50 Municipality/City 5P Province 5Q Zip Code 5R Landline No.

PNPKI RA Form 2018-01A

Version 4 Date Revised August 2022



Annex E-6 (FOR BARMM-MBHTE PUBLIC ELEMENTARY AND SECONDARY SCHOOLS PERSONNEL)

PHILIPPINE NATIONAL PKI								
APPLICATION FOR DIGITAL CERTIFICATE								
Application ID Number (For Official Use only)								
Instructions:			<u> </u>	<u> </u>				
 Please fill the form in BLOCK LETTERS ONLY. Required fields are marked WITH AN ASTERISK (*). Present one (1) copy and the original documents to our Registration Authority for verification and attestation. Any information that is not verified shall not be included in certificates. Any discrepancy or inconsistency in the form will lead to delay and/or rejection. Put a CHECK ON THE BOX that corresponds to your answer. Do NOT INPUT ABBREVIATED information or ACRONYMS. 								
1. CERTIFICATE CLA	ASS	2. CERTIFICATE TYPI	E .	3. METHOD	OF ACTIVATION			
1A Individual	3	2A Signing 2B Authenticati	on	3A.Z Online Download				
		4. APPLICANT	'S DETAILS	rile Zerie				
4A* Last Name	Y	First Name	4C* Middle	Name	4D* Name Extension (JR/SR/III)			
DELA CRUZ	JU	AN	PABLO					
4E* Gender Ma	le / Fema	Nationality [G* Date of Birth 23/01/2000 DD/MM/YYYY)				
4H* TIN 123-456	6-789	4I S	SS No.					
4J GSIS No.	41	Philhealth		4L Pag-ibig No.				
4M CRN No.		4N O' or IDs presented	during face to face verific	cation				
40* Organization / Ag	ency / Company	DEP. ".ME' I	OF EDUCATION	N-NCR				
4P* Organizational Ur	nit / Department / Divisio	on S O	ON CITY - NO	ORTH FAIR	VIEW ES (123456)			
4Q Marital Status	Single Married	Widow			······································			
4R Employment Statu	s Working	Student Self-employe	ed Unemployed	Senior Citizen				
	Last Name	First Name	Middle Name	Name Extension (JR/SR/III)	Birthdate Living / De- (DD/MM/YYYY) ceased			
4S Spouse Name								
4T Mother's Maiden Name								
4U Father's Name								
		5. CONTACT	DETAILS					
		Residential	Address	V	ム			
5A* Unit/Room/House	No. 1234		58* Street	ILOVE	OU STREET			
5C* Barangay	BARANGAY NO	RTH FAIRVIEW	5D* Municipality/0	QUEZON CITY				
5E* Province	METRO MANILA	4	5F* Zip Code	1100				
5G Landline No.			5H* Mobile No. 63999999999					
5I* Official Work Emai	l Address juan.dela	a_cruz@deped.gov.ph	* PNPKI-related e	mails will be ser	nt to this email address			
		Office Ad	dress					
5K Unit/Room/Floor N	lo.		5L Building					
5M Street			5N Barangay	1				
50 Municipality/City			5P Province					
5Q Zip Code			5R Landline No.					
PNPKI RA Form 2018-01A								
Version 4 Date Revised August 2022								

