CS Form	No. 212
Revised 20:	17
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## PERSONAL DATA SHEET

FIRST NAME  LOUISE ADELINE  NA  ALANDRA  DOMINIKA MICHAELLE AUDZEIN Q. GARRIDO  1/10/2015  1/10/2015  1/10/2015  DOMINIKA MICHAELLE AUDZEIN Q. GARRIDO  1/10/2015  1/	Name and the second sec	s ( and use separate sheet if necessary. Indicate N	ET (PDS) BEFORE ACCOMP I/A if not applicable. DO NOT AB	BREVIATE.		1. CS ID No.		(Do not fill up.	For CSC use on	
SECTIONS   MICHAEL DOMINIC										
MADREDUO	2. SURNAME	GARRIDO			-		1			
September   Sept	FIRST NAME	MICHAEL DOMINIC				N/A		1000		
MACRO   SITTI		MADREDIJO								
MACRO   Male		3/8/1992	16. CITIZENSHIP		<b>☑</b> Fili	pino [			lization	
GORD, STATUS	4. PLACE OF BIRTH	MACROHON, SOUTHERN LEYTE	1		Pls. indicate of			Begressell		
Moderned   Other/Is	5. SEX	✓ Male Female	please indicate the de	tails.						
1.68	6 CIVIL STATUS	Widowed Separated	17. RESIDENTIAL ADDRESS	and the second	use/Block/Lot N N/A	se/Block/Lot No. N/A			Street GABAS	
8 MEGAT (Age)  8 DECOLOTYS  9 BLOCO TYPE  9	7. HEIGHT (m)	1.68			BAYBAY CITY	CITY LEYTE			140)	
9 R.COD TYPE  O	8. WEIGHT (kg)	72.5	ZIP CODE	(	City/Municipality	1	6521	Province	1000	
10   SOSSIDINO	9. BLOOD TYPE	0	18. PERMANENT ADDRESS		N/A	3 6 4	0021	ESTRELLA		
11 PRG-BIS D NO			AND TARK INSTALL	Но		ło.		Street		
12 PRIJECTION   NA   20 CODE   6601	10. GSIS ID NO.	N/A	2012/4 1	Sı		ie .			Canada	
12 PRIJECTION   N/A   19 TELEPHONE NO	11. PAG-IBIG ID NO.	N/A	17.67 may 12.	(	The state of the s				RN LEYTE	
14. TIN NO 729-331-460 20 MOBILE NO. 09288544908 15. AGENCY EMPLOYEE NO. N/A 21 E-MAIL ADDRESS (If any) MECONOMIC PROPRIOR NO. 09288544908 16. FAMILY BAGK/GROUND 27. SPOURES SURJIVANE QUEIPO 22. NAME-OF CIPHEREN (With this name and sol all) DATE OF BRITH (minisdry). 17. FRIST NAME LOUISE ADELINE N/A ALEXIS DOMINIQUE Q. GARRIDO 11/4/2020 17. GOUNTRON STUDENT DOMINICA MICHAELLE AUDZEIN Q. GARRIDO 11/4/2020 17. GOUNTRON STUDENT N/A DOMINIKA MICHAELLE AUDZEIN Q. GARRIDO 11/4/2020 17. GOUNTRON STUDENT N/A DOMINIKA MICHAELLE AUDZEIN Q. GARRIDO 11/4/2020 17. GOUNTRON STUDENT N/A	12. PHILHEALTH NO.	N/A	ZIP CODE	ST.	Cornik a	and Pri	Carlos and Carlos	Signification - Brown		
ASSENCY EMPLOYEE NO.  N/A  21 EMAIL ADDRESS (Filtry)  Macdomz003@gmail.com  II. FAMILLY BACKGROUND  22 SANAE of CHILDREN (White Mill name and last all)  LOUISE ADELINE  LOUISE ADELINE  N/A  ALAXIS DOMINIQUE Q. GARRIDO  1/10/2015  MODULE HAME  ALANDRA  DOMINIKA MICHAELLE AUDZEIN Q. GARRIDO  1/14/2020  1/14/2	13. SSS NO. 1944 10 1944 11	N/A	19. TELEPHONE NO.		ROT MA	4. 3. 70	N/A	0.982000 - 0.0820		
IL FAMILY BACKGROUND  22 SPOUSES SURVIAME  FIRST NAME  LOUISE ADELINE  MIDULE NAME  ALANDRA  DOMINIKA MICHAELLE AUDZEN Q. GARRIDO  11/14/2020  11/14/2	14. TIN NO.	729-331-460	20. MOBILE NO.		09268544808					
QUEIPO 22. NAME (VINITE BUT INTERPRETA PART A CONTINUE OF SECTIONALE SECONDARY ELEMENTARY I CHON NATIONAL HIGH SCHOOL  RESCONDARY (VINITE BUT INTERPRETA PART A CONTINUE OF SCHOOL)  RESCONDARY (VINITE BUT INTERPRETA PART A CONTINUE OF SCHOOL)  RESCONDARY (ICHON NATIONAL HIGH SCHOOL)  RECONDARY (ICHON NATIONAL HIGH SCHOOL)  REAL PARTS SURVAME  QUEIPO  22. NAME of CHILDREN (White bit name and let all)  DATE OF BIRTH (IOM/Sdy)yyy  ALEXIS DOMINIQUE Q. GARRIDO  11/10/2015  11/10/2015  11/10/2015  11/10/2015  11/10/2015  11/10/2015  11/10/2015  DOMINIKA MICHAELLE AUDZEIN Q. GARRIDO  11/10/2015	15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)		n	nacdomz	003@gmail.d	com		
FIRST NAME MIDDLE NAME ALANDRA DOMINIKA MICHAELLE AUDZEIN Q. GARRIDO 11/02/015 11/02/0	II. FAMILY BACKGROUND									
MIDDLE NAME  ALANDRA  ALANDRA  DOMINIKA MICHAELLE AUDZEIN Q. GARRIDO  11/14/2020  11/14/20	22. SPOUSE'S SURNAME	QUEIPO		23. NAME of CH	HILDREN (Writ	e full name and	l list all)	DATE OF BIR	TH (mm/dd/yyyy)	
COCUPATION STUDENT  EMPLOYERBUSINESS NAME  BUSINESS ADDRESS  NIA  TELEPHONE NO  NIA  FATHERS SURNAME  ROMMEL  NIA  TRIPOLI  MARIETTA ZAPANTA MADREDIJO  FIRST NAME  MARIETTA ZAPANTA MADREDIJO  FIRST NAME  MARIETTA  MARIETTA  MARIETTA  TAPANTA  MARIETTA  TAPANTA  (Continue on separate sheet if nocessary)  III. EDUCATIONAL BACKGROUND  TO  LEVEL  NAME OF SCHOOL  (While in full)  ELEMENTARY  ICHON ELEMENTARY SCHOOL  FRIBARY EDUCATION  FRIFT	FIRST NAME	LOUISE ADELINE	N/A	ALE			1/10/2015			
EMPLOYER/BUSINESS NAME  BUSINESS ADDRESS  NA  TELEPHONE NO.  NA  FATHER'S SURVAME  GARRIDO  FIRST NAME  ROMMEL  NA  MODULE NAME  TRIPOLI  MARIETTA ZAPANTA MADREDIJO  SURVAME  MARIETTA  TAPANTA  (Continue on separate sheet if necessary)  III. EDUCATIONAL BACKGROUND  ANA  LEVEL  NAME OF SCHOOL  (Write in full)  FIRST NAME  NAME OF SCHOOL  HORDERS  HORDER	MIDDLE NAME	ALANDRA		DOMINIK	A MICHAEL	LE AUDZEI	Q. GARRIDO	11/4	1/2020	
BUSINESS ADDRESS  NIA  TELEPHONE NO.  ANA  TELEPHONE NO.  ANA  FRIST NAME  MODLE NAME  TRIPOLI  MARIETTA ZAPANTA MADREDIJO  FIRST NAME  MARIETTA  MODLE NAME  TRIPOLI  MARIETTA  MODLE MODLE NAME  TRIPOLI  MARIETTA  MODLE NAME  TRIPOLI  MODLE NAM	OCCUPATION	STUDENT								
TELEPHONE NO.  N/A  24. FATHERS SURNAME  GARRIDO  FIRST NAME  MIDULE NAME  MARIETTA  MIDULE NAME  MARIETTA  MIDULE NAME  MARIETTA  MIDULE NAME  TAPANTA  MARIETTA  MIDULE NAME  MARIETTA  MIDULE NAME  TAPANTA  MARIETTA	EMPLOYER/BUSINESS NAME	N/A								
FIRST NAME  MODULE NAME  MARIETTA ZAPANTA MADREDIJO  FIRST NAME  MARIETTA  MIDDLE NAME  TEPOLI  MARIETTA  MIDDLE NAME  MARIETTA  MIDDLE NAME  TAPANTA  MARIETTA  MIDDLE NAME  TAPANTA  (Continue on separate sheet if necessary)  MARIETTA  MIDDLE NAME  TAPANTA  (Continue on separate sheet if necessary)  MARIETTA  MIDDLE NAME  TO  MARIETTA  MIDDLE NAME  TAPANTA  (Continue on separate sheet if necessary)  MARIETTA  MIDDLE NAME  TO  MARIETTA  MIDDLE NAME  TAPANTA  (Continue on separate sheet if necessary)  MARIETTA  MIDDLE NAME  TO  MARIETTA  MIDDLE NAME  TO  MARIETTA  MIDDLE NAME  TO  MARIETTA  MIDDLE NAME  TO  MARIETTA  MIGHEST LEVEL  UNITS EARNED  (IF not graduated)  GRADUATED  MODERNA  AND MIA  MIA  MIA  MIA  MIA  MIA  MIA  MIA	BUSINESS ADDRESS	N/A								
FIRST NAME  ROMMEL  RARIETTA ZAPANTA MADREDIJO  FIRST NAME  MARIETTA  MIDDLE NAME  ROMETTA  MIDDLE NAME  ROMMEL  RARIETTA  MIDDLE NAME  ROMMEL  RARIETTA  MIDDLE NAME  ROMMEL	TELEPHONE NO.	N/A								
MIDDLE NAME  TRIPOLI  MARIETTA ZAPANTA MADREDIJO  SURNAME  MARIETTA  MIDDLE NAME  MARIETTA  MARIETTA  MARIETTA  MIDDLE NAME  MARIETTA  MARIETTA  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDLE NAME  MIDDLE NAME  MIDDLE NAME  MIDLE NAME  MIDLE NAME  MIDLE NAME  MIDLE NAME  MIDLE NAM	24. FATHER'S SURNAME	GARRIDO								
MARIETTA ZAPANTA MADREDIJO  SURNAME  MARIETTA  MIDDLE NAME  TAPANTA  MARIETTA  MIDDLE NAME  TO  LEVEL  NAME OF SCHOOL (Write in full)  ELEMENTARY  ICHON ELEMENTARY SCHOOL  SECONDARY  ICHON NATIONAL HIGH SCHOOL  SECONDARY  ICHON NATIONAL NIA  NIA  NIA  NIA  NIA  NIA  NIA  NIA	FIRST NAME	ROMMEL	NA							
SURIVAME  FIRST NAME  MARIETTA  MIDDLE NAME  ZAPANTA  ZAPANTA  (Continue on separate sheet if necessary)  III. EDUCATIONAL BACKGROUND  28. LEVEL  NAME OF SCHOOL (Write in full)  BASIC EDUCATION/DEGREE/COURSE (Write in full)  From To  To  Graduated)  From To  ICHON ELEMENTARY SCHOOL  PRIMARY EDUCATION  FROM TO  Grif1998  3/26/2004  N/A  2004  STH HONORSABLE MENTION  SECONDARY  ICHON NATIONAL HIGH SCHOOL  SECONDARY EDUCATION  FROM TO  Grif1998  3/26/2004  N/A  2004  STH HONORSABLE MENTION  SECONDARY  VOCATIONAL / TRADE COURSE  VISAYAS STATE UNIVERSITY  BACHELOR OF ANIMAL SCIENCE  6/9/2008  5/30/2012  2012  N/A  CHED K12  CHED K12  CHED K12	MIDDLE NAME	TRIPOLI								
FIRST NAME MIDDLE NAME  ZAPANTA  (Continue on separate sheet if necessary)  REDUCATIONAL BACKGROUND  RELEVEL  NAME OF SCHOOL (Write in full)  BASIC EDUCATIONDEGREE/COURSE (Write in full)  BASIC EDUCATIONDEGREE/COURSE (Write in full)  From To  Graduated)  From To  ICHON ELEMENTARY SCHOOL  PRIMARY EDUCATION  From To  Graduated  From To  Graduated  From To  Graduated  From To  Graduated  From To  From To  Graduated  From To  Graduated  From To  From To  From To  Graduated  From To  HIGHEST LEVEL/ UNITS EARNED  GRADUATED  From To  Graduated  From	25. MOTHER'S MAIDEN NAME	MARIETTA ZAPANTA MA	DREDIJO							
MIDDLE NAME  ZAPANTA  (Continue on separate sheet if necessary)  REPUICATIONAL BACKGROUND  RELEVEL  NAME OF SCHOOL (Write in full)  BASIC EDUCATIONDEGREE/COURSE (Write in full)  From To  ICHON ELEMENTARY SCHOOL  PRIMARY EDUCATION  From To  ICHON NATIONAL HIGH SCHOOL  SECONDARY  ICHON NATIONAL HIGH SCHOOL  SECONDARY  ICHON NATIONAL HIGH SCHOOL  SECONDARY EDUCATION  RECEIVED  RECEIVED  RECEIVED  FROM To  6/1/1998  3/26/2004  N/A  2004  STH HONGRABLE MENTION  N/A  N/A  N/A  N/A  N/A  N/A  N/A  N	SURNAME	MADREDIJO								
LEVEL   NAME OF SCHOOL (Write in full)   BASIC EDUCATION/DEGREE/COURSE (Write in full)   PERIOD OF ATTENDANCE (Write in full)   From   To   WIGHEST LEVEL UNITS EARNED (if not graduated)   From   To   Wind graduated   Wind gra	FIRST NAME	MARIETTA								
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LEVEL NAME OF SCHOOL (Write in full)  BASIC EDUCATION/DEGREE/COURSE (Write in full)  From To To From T	III. EDUCATIONAL BACKG	ROUND								
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SECONDARY ICHON NATIONAL HIGH SCHOOL SECONDARY EDUCATION 6/7/2004 3/27/2008 N/A 2008 N/A  VOCATIONAL / TRADE COURSE N/A N/A N/A N/A N/A N/A N/A N/A N/A  COLLEGE VISAYAS STATE UNIVERSITY BACHELOR OF ANIMAL SCIENCE 6/9/2008 5/30/2012 2012 N/A  GRADUATE STUDIES VISAYAS STATE UNIVERSITY MASTER OF SCIENCE IN ANIMAL SCIENCE 11/10/2014 6/15/2018 N/A 2018 CHED K12	ELEMENTARY ICHON ELEMENTARY SCHOOL		PRIMARY EDUCATION		-		N/A	2004	5TH HONORABLE	
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COLLEGE VISAYAS STATE UNIVERSITY BACHELOR OF ANIMAL SCIENCE 6/9/2008 5/30/2012 2012 N/A  GRADUATE STUDIES VISAYAS STATE UNIVERSITY MASTER OF SCIENCE IN ANIMAL SCIENCE 11/10/2014 6/15/2018 N/A 2018 CHED K12		N/A	N/A		N/A	N/A	N/A	N/A		
GRADUATE STUDIES VISAYAS STATE UNIVERSITY MASTER OF SCIENCE IN ANIMAL SCIENCE 11/10/2014 6/15/2018 N/A 2018 CHED K12		VISAYAS STATE UNIVERSITY	BACHELOR OF ANIMAL S	CIENCE	6/9/2008	5/30/2012				
TO INTERCED TO SELECTION OF THE PARTY OF THE	GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF SCIENCE IN ANIM	AL SCIENCE			MIA		CHED K12	

7. CAR		080 (BOARD/ BAR) UNDER	RATING	DATE OF	DI AGE OF THE	nov (co)	il marr	, LICENSE (IF G	H
	ARANGAY ELIGIBILI	NS/ CES/ CSEE TY / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT   PLACE OF EXAMINATION / CONFERMENT      11/28/2017   HOLY INFANT COLLEGE, BRGY UTAP, TACLOBAN CITY, LEYTE		NUMBER :	Date of Validity		
RA 1	AGRICULT	PROFESSIONAL	81.3				0028808	2/15/201	
CAREER	SERVICE PROFE	ESSIONAL ELIGIBILITY	83.2	10/21/2012	SAINT JOSEPH COL	LEGE, MAA	SIN CITY ,	NO. 315174	12/6/201
	EXPERIENCE			ontinue on separate sheet					
		t. Start from your recent	work) Descriptio	n of duties should be	indicated in the attached	Work Exper	SALARY/ JOB/ PAY		
(1	LUSIVE DATES mm/dd/yyyy)	POSITION TIT (Write in full/Do not a			ENCY / OFFICE / COMPANY /Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
From	То			PHILIPPINE COUNCIL F	UR AGRICULTURE, AQUATIC,		INCREMENT		
1/2014	7/30/2015	RESEARCH ASS		AND NATURAL RES	OURCES RESEARCH AND FLOPMENT ATE UNIVERSITY - BONTOC	10198.00	N/A	JOB ORDER	Y
112013	3/31/2016	PART-TIME INST			AMPUS	(AVERAGE)	N/A	PART-TIME	Υ
5/2017 1/2018	12/12/2017	(PRINCIPLES OF ANIMA	AL SCIENCE)	UN	AL SCIENCE, VISAYAS STATE IVERSITY AL SCIENCE, VISAYAS STATE	VOLUNIEER	N/A	N/A	Y
	12/31/2018	SUBSTITUTE INST	RUCTUR	UN	IVERSITY	22149.00	N/A	TEMPORARY	Y
1/2019	7/31/2019	SUBSTITUTE INST		DEPARTMENT OF ANIMAL SCIENCE, VISAYAS STATE UNIVERSITY DEPARTMENT OF ANIMAL SCIENCE, VISAYAS STATE		22149.00	N/A	TEMPORARY	Y
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VI. VOLUNTARY NORK OR INVO PEMEN				RGANIZATION	/S		
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		
PHILIPPINE GUARDIANS BROTHERHOOD INC	10/1/2010	CURRENT	N/A		MEMBER		
					***************************************		
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12 (5)					ALO CALL	radio, no nach the compared de-	
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VII. LEARNING AND DEVELOPMENT (L& (Start from the most recent L&D/training program and inc				f/Executive/Manageri	al positions)		
30. TITLE OF LEARNING AND DEVELOPMENT II		INCLUSIVE	DATES OF DANCE	100 A	Type of LD	ACHIDIATEDI PROMEORED DV	
(Write in		(mm/d	d/yyyy)	NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
N/A		From N/A	To N/A	N/A	N/A	N/A	
	a determination						
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VIII. OTHER INFORMATION	C	ontinue on separate	sheet if necessary		eranov filozofica		
2000 March 1882	NC	ON-ACADEMIC DISTIN	ICTIONS / RECOG	SNITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION	
31. SPECIAL SKILLS and HOBBIES	32		e in full)			33. (Write in full)  SOCIETY OF ANIMAL SCIENCE	
PLAYING SEPAK TAKRAW		STUDENT(Visayas State University) VISAYAS STATE UNIVERSITY ALUMNI					
PLAYING GUITAR  COOKING				ASSOCIATION GAMMA SIGMA SCORPIONS MAGENTA CHAPTER,			
DRAWING			M	2310		VISAYAS STATE UNIVERSITY, VISCA BAYBAY CITY, I FYTE	
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SIGNATURE		fn.p.		DATE		/2 - 67 - 2070 CS FORM 212 (Revised 2017), Page 3 of	

34.	Are you related by consanguinity or affinity to the appointing of chief of bureau or office or to the person who has immediate						
	Bureau or Department where you will be approinted,	Suportion of or you in the emoty	1	- 00			
	a. within the third degree?	☐ YES ☑ NO					
	b. within the fourth degree (for Local Government Unit - Care	er Employees)?	YES V NO				
		H TWENT LANGUE	If YES, give details:				
35.	a. Have you ever been found guilty of any administrative offer	nse?	☐ YES ☑ NO				
			If YES, give details:				
	b. Have you been criminally charged before any court?		☐ YES ☑ NO				
			If YES, give details: Date Filed:				
			Status of Case/s:				
36.	Have you ever been convicted of any crime or violation of an	y law, decree, ordinance or regulation by	☐ YES ☑ NO				
	any court or tribunal?		If YES, give details:				
37.	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fi	inished contract or phased out (abolition)	YES NO If YES, give details:				
	in the public or private sector?		End of Contract				
38.	a. Have you ever been a candidate in a national or local electronary election)?	ction held within the last year (except	☐ YES ☑ NO If YES, give details:				
	b. Have you resigned from the government service during the	e three (3)-month period before the last	☐ YES ☑ NO				
	election to promote/actively campaign for a national or local		If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent	resident of another country?	☐ YES ☑ NO				
			If YES, give details (country)				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag	nna Carta for Disabled Persons (RA 7277);	,				
	and (c) Solo Parents Welfare Act of 2000 (RA 8972), please	answer the following items:					
a.	Are you a member of any indigenous group?		☐ YES ✓ N If YES, please specify:	10			
b.	Are you a person with disability?		☐ YES ☑ NO				
C.	Are you a solo parent?		If YES, please specify ID No:				
Market State	The you a solo parone.		If YES, please specify ID No:				
41.	. REFERENCES (Person not related by consanguinity or affinity to applicant	nt /appointee)					
Name of	NAME	ADDRESS	TEL. NO.				
	DINAH M. ESPINA, Ph.D	Apt 9. Visca, Baybay City Leyte	9173276763				
	JULIUS V. ABELA, Ph.D	Visca, Baybay City, Leyte	9208553990				
	LOLITO C. BESTIL, Ph.D	Brgy. Guadalupe, Baybay City, Leyte	9177052058				
42	I declare under oath that I have personally accomplishe complete statement pursuant to the provisions of pertir Philippines. I authorize the agency head/authorized repress agree that any misrepresentation made in this doct administrative/criminal case/s against me.	nent laws, rules and regulations of the entative to verify/validate the contents stat	Republic of the ed herein.				
	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance	1	2. 10				
lF	Government Issued ID: Voter's Id	1	ny,				
Н	ID/License/Passport No.: 6408-0037A-C0892MMG10000	Signature (Sign inside the	hovi				
Н	Date/Place of Issuance: MACROHON, SO. LEYTE	DOX)	Right Thumbmark				
L		Date Accomplished					
	SUBSCRIBED AND SWORN to before me this	, affiant exhi	biting his/her validly issued governme	ent ID as indicated above.			
		ATTY. RYSAN GUINOCOR VSU Chief legal Officer  Person Administering Officer	ath				
		. See	1				