PERSONAL DATA SHEET

| | s (and use separate sheet if necessary. Indicate | N/A if not applicable. DO NOT A | BBREVIATE. | | 1. CS ID No. | | (Do not fill up. Fo | r CSC use o | |
|---|--|--|--|--|-----------------|--|---------------------|---|--|
| . PERSONAL INFORMATIO | | | | | | | | | |
| 2. SURNAME | TUMULAK | | | | | NAME EXTENSION / ID | CDI | | |
| FIRST NAME | GERONIMO | | | | | NAME EXTENSION (JR | ., SK) | | |
| MIDDLE NAME | PALER | | | | | | | | |
| DATE OF BIRTH (mm/dd/yyyy) | 11/28/1961 | 16. CITIZENSHIP | | ☑ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturali | | | by naturaliza | ition | |
| 4. PLACE OF BIRTH | LAPAZ, BOGO CEBU | If holder of dual citiz | enship, | | | Pls. indicate co | ountry: | | |
| 5. SEX | ✓ Male ☐ Female | please indicate the | details. | | | | | | |
| 6 CIVIL STATUS | ☐ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s: | 17. RESIDENTIAL ADDRESS | House/Block/Lot No. Subdivision/Village | | | Street SAN AGUSTIN Barangay | | | |
| 7. HEIGHT (m) | 5'6 | and the state of t | В | AYBAY CITY | | | LEYTE | SH | |
| 8. WEIGHT (kg) | 72 KG | ZIP CODE | 6521-A | City/Municipality | | | Province | | |
| 9. BLOOD TYPE | "0" | 18. PERMANENT ADDRESS | | | | | | | |
| 10. GSIS ID NO. | LP-61112803164 | N. STATE CASACIO | House/Block/Lot No. | | | | SAN AGUSTIN | | |
| 11. PAG-IBIG ID NO. | 1700-0026-3805 | VIGAYAS STATE U | Si | ubdivision/Village BAYBAY | | | Barangay LEYTE | | |
| 12 PHILHEALTH NO. | 13-000058604-9 | ZIP CODE | 6521-A | City/Municipality | | | Province | | |
| 13. SSS NO. | 0620855541 | 19. TELEPHONE NO. | 0021-A | 1.80 | AS . 2100 | h_h | 4-77-77 | BIO. | |
| 4. TIN NO. | 116-627-956 | ULGRATE PAYAGO | | | | | | 135.16 | |
| 537- 384690 | + | 20. MOBILE NO. | | | | | 444 | TARK T | |
| 15. AGENCY EMPLOYEE NO. | V0000654 | 21. E-MAIL ADDRESS (if any) | | | | | | 1.11/- | |
| I. FAMILY BACKGROUND | | | | | | ra e | | | |
| 22. SPOUSE'S SURNAME | TUMULKA | NAME EXTENSION (JR., SR) | | HILDREN (Write | e full name and | l fist all) | DATE OF BIRTH | | |
| FIRST NAME | SISINIA | INAME EXTENSION (SR., SR) | ALVIN T. AMISTOSO | | | TOA . | 08/24/1995 | | |
| MIDDLE NAME | MONTILLANO | | ENIA T. AMISTOSO | | | | | | |
| OCCUPATION | HOUSE WIFE | | | | | | | | |
| EMPLOYER/BUSINESS NAME | NONE | Marie Level College | | | | | | 2 712 13 | |
| | | | | | | | | 190 E | |
| BUSINESS ADDRESS | NONE | A 3-D A Prior LATE | | | | | | | |
| BUSINESS ADDRESS TELEPHONE NO. | NONE | STATE STATE | | 1.5 | may. | | | JE01-10 | |
| TELEPHONE NO. | | www.lfafe.html. | | 4.6 | | | | den a | |
| TELEPHONE NO. | NONE | NAME EXTENSION (JR., SR) | | 1.50 | | | | 300 mg | |
| TELEPHONE NO. 24. FATHER'S SURNAME | NONE TUMULAK | NAME EXTENSION (JR., SR) | | 4.84 | Z SU | | | \$607.F3 | |
| TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME | NONE TUMULAK GEORGE | NAME EXTENSION (JR., SR) | | 1 | | | | 80 A | |
| TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME | NONE TUMULAK GEORGE | NAME EXTENSION (JR., SR) | | 15 | Z B Q | | | \$400 pt 1 | |
| TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME | NONE TUMULAK GEORGE DAMOS | NAME EXTENSION (JR., SR) | | (h | | | | 800183 800183 | |
| TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME | NONE TUMULAK GEORGE DAMOS TIROL | NAME EXTENSION (JR., SR) | | (CC | ontinue on se | parate sheet if neces | ssary) | 900 mg | |
| TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME | NONE TUMULAK GEORGE DAMOS TIROL MAXIMINA ATON | NAME EXTENSION (JR., SR) | | (Ce | ontinue on sej | parate sheet if neces | sary) | 400 A | |
| TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME | NONE TUMULAK GEORGE DAMOS TIROL MAXIMINA ATON | NAME EXTENSION (JR., SR) BASIC EDUCATION/DEGR | REE/COURSE | PERIOD OF A | ATTENDANCE | HIGHEST LEVEL/ UNITS EARNED (if not graduated) | YEAR GRADUATED | ACADEMIC HONORS | |
| TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 55. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME MIDDLE NAME MIDDLE NAME MIDDLE NAME | NONE TUMULAK GEORGE DAMOS TIROL MAXIMINA ATON GROUND | BASIC EDUCATION/DEGR | | | | HIGHEST LEVEL/ UNITS EARNED | YEAR | SCHOLARSH ACADEMIC HONORS RECEIVED | |
| TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 55. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME MIDDLE NAME 11. EDUCATIONAL BACKO 26. LEVEL | NONE TUMULAK GEORGE DAMOS TIROL MAXIMINA ATON SROUND NAME OF SCHOOL (Write in full) | BASIC EDUCATION/DEGI | | PERIOD OF A | To | HIGHEST LEVEL/ UNITS EARNED (if not graduated) | YEAR GRADUATED | ACADEMIC HONORS RECEIVED | |
| TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 5. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME II. EDUCATIONAL BACKO 26. LEVEL | NONE TUMULAK GEORGE DAMOS TIROL MAXIMINA ATON GROUND NAME OF SCHOOL (Write in full) LAPAZ ELEMENTARY SCHOOL | BASIC EDUCATION/DEGI (Write in full) | | PERIOD OF A | To | HIGHEST LEVEL/ UNITS EARNED (if not graduated) | YEAR GRADUATED | ACADEMIC HONORS RECEIVED | |
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| . CAREE | R SERVICE/ RA 1080 | (BOARD/ BAR) UNDER | RATING | DATE OF | March Jeggs | 19 | | LICENSE (if ap | plicable) |
|---|--|-------------------------------------|-----------------------------|--|--------------------------|-------------------|--|--------------------------|--------------------------|
| SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE | | (If Applicable) | EXAMINATION / CONFERMENT | PLACE OF EXAMINATION / CONFERMENT | | | NUMBER | Date o Validity | |
| | N/A | | N/A | N/A | N N | /A | | N/A | N/A |
| | | | | | | | | | |
| | XPERIENCE ate employment. | Start from your recei | | ntinue on separate sheet it | necessary) | ed Work Exp | erience shee | ∍t, | |
| (mr | SIVE DATES n/dd/yyyy) | POSITION T (Write in full/Do not | | DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate) | | MONTHLY SALARY | SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format *00-0*)/ | STATUS OF APPOINTMENT | GOV'T SERVIC (Y/N) |
| From 01/01/2017 | To PRESENT | ADMINISTRATI | VE AIDE I | MCAVACCT | ATE LINIVERSITY | 40.000.00 | INCREMENT | DEDMAN | |
| 01/01/2017 | 12/31/2016 | ADMINISTRATI | | | ATE UNIVERSITY | 10,072.00 | 1 | PERMANENT | YES |
| 11/02/2014 | 12/31/2016 | ADMINISTRATI | | | ATE UNIVERSITY | 9,568.00 | 1 | PERMANENT | YES |
| 06/01/2012 | | | | | ATE UNIVERSITY | 9,090.00 | 1 | PERMANENT | YES |
| | 11/01/2014 | ADMINISTRATI | | | ATE UNIVERSITY | 9,000.00 | 1 | PERMANENT | YES |
| 00/02/2011 | 05/31/2012 | ADMINISTRATI | | | ATE UNIVERSITY | 8,287.00 | 1 | PERMANENT | YES |
| 01/01/2011 | 11/01/2011 | ADMINISTRATI | | | ATE UNIVERSITY | 7,575.04 | 1 | CASUAL | YES |
| 01/01/2010 | 12/31/2010 | ADMINISTRATI | | DE I VISAYAS STATE UNIVERSITY | | | 1 | CASUAL | YES |
| 07/01/2008 | 12/31/2009 | ADMINISTRATI | 2.20 | VISAYAS STA | ATE UNIVERSITY | 6,149.00 | 1 | CASUAL | YES |
| 07/01/2007 | 12/31/2008 | ADMINISTRATI | VE AIDE I | VISAYAS STA | ATE UNIVERSITY | 5,589.98 | 1 | CASUAL | YES |
| 01/01/2005 | 06/30/2007 | ADMINISTRATI | VE AIDE I | LEYTE STATE UNIVERSITY | | 5,082.00 | 1 | CASUAL | YES |
| 09/27/2004 | 12/31/2004 | LABORE | R1 | LEYTE STA | TE UNIVERSITY | 5,082.00 | N/A | CASUAL | YES |
| 01/01/1996 | 12/31/1996 | LABORE | R1 | LEYTE STA | TE UNIVERSITY | 4,400.00 | N/A | CASUAL | YES |
| 01/01/1995 | 12/31/1995 | LABORE | R 1 | LEYTE STATE UNIVERSITY | | 3,800.06 | N/A | CASUAL | YES |
| 01/01/1994 | 12/31/1994 | LABORE | R 1 | LEYTE STATE UNIVERSITY | | 2,799.72 | N/A | CASUAL | YES |
| 01/01/1993 | 12/31/1993 | LABORE | R1 | LEYTE STATE UNIVERSITY | | 1,999.80 | N/A | CASUAL | YES |
| 07/01/1989 | 12/31/1992 | LABORE | R 1 | VISAYAS STATE COLLEGE OF AGRICULTURE | | 1,999.80 | N/A | CASUAL | YES |
| 12/14/1987 | 05/30/1989 | LABORE | R | VISAYAS STATE COLLEGE OF AGRICULTURE | | 722.70 | N/A | CASUAL | YES |
| 03/01/1987 | 12/13/1987 | LABORE | R | VISAYAS STATE COLLEGE OF AGRICULTURE | | 503.80 | N/A | CASUAL | YES |
| 07/01/1986 | 02/28/1987 | LABORE | R | VISAYAS STA AGRIC | 437.80 | N/A | CASUAL | YES | |
| 01/01/1985 | 06/30/1986 | LABORE | R | VISAYAS STA AGRIC | 398.20 | N/A | CASUAL | YES | |
| 05/16/1984 | 12/31/1984 | LABORE | R | VISAYAS STA AGRIC | 361.90 | N/A | CASUAL | YES | |
| 03/10/1983 | 04/30/1984 | LABORE | ER | | TE COLLEGE OF CULTURE | 328.90 | N/A | CASUAL | YES |
| | | | | 4,00 | | 0.1 | | | |
| and the later of | THE STATE OF | amb | (Cor | ntinue on separate sheet if | necessary) | | | | |

| 29. | NAME & ADDDESS OF OD | CAMIZATION | INCLUSIV | E DATES | | Trans. | Committee of the second |
|--|---|--|----------------------------------|-------------------------------|-----------------------|--------------------------------|--|
| 9. • | NAME & ADDRESS OF OR (Write in full) | GANIZATION | (mm/de | ∮уууу) | NUMBER OF HOURS | | POSITION / NATURE OF WORK |
| | N/A | | From | То | | | A Jergeo Die z Bot Futtole Ja |
| | N/A | | N/A | N/A | N/A | | N/A |
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| I. LEARNING AN | D DEVELOPMENT (L&D) I | (Cont NTERVENTIONS/TRAINING PR | inue on separate s OGRAMS ATI | | n/) | | |
| | | e only the relevant L&D training taken for i | | | hief Executive/Manage | erial positions) | |
|). TITLE OF LE | ARNING AND DEVELOPMENT INTE | DPMENT INTERVENTIONS/TRAINING PROGRAMS | | INCLUSIVE DATES OF ATTENDANCE | | Type of LD (Managerial/ | CONDUCTED/ SPONSORED BY |
| | (Write in full) | | (mm/d | | NUMBER OF HOURS | Supervisory/ Technical/etc) | (Write in full) |
| | N/A | Wilder Services The They Prince | From | То | | 到15年,10年2 年 | |
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| III. OTHER INFOR | RMATION | (Com | tinue on separate s | heet if necessa | ny) | | |
| | | NOV | -ACADEMIC DISTIN | ICTIONS / DEC | CAUTION | | MEMBERSHIP IN ASSOCIATION/ORGANIZAT |
| 31. SPECIA | L SKILLS and HOBBIES | 32. NON | | in full) | JONETION | | 33. (Write in full) |
| DLLEYBALL | | | N/A | | | | LEYTE STATE UNIVERSITY ADMINISTRA |
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| unite and animal and animal and animal anima | | | | | | - v | |
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| | | | | | V.P. | | |

| 34. | Are you related by consanguinity or affinity to the oin | | | | | | |
|-----|--|--|--|--|--|--|--|
| | chief of bureau or office or to the person who has immed | iate supervision over you in the Office, | 1 | | | | |
| | Bureau or Department where you will be apppointed, | | · · | | | | |
| | a. within the third degree? | | ☐ YES ☑ NO | | | | |
| | b. within the fourth degree (for Local Government Unit - | Career Employees)? | ☐ YES ☑ NO | | | | |
| | | | If YES, give details: | | | | |
| | | | IT TES, give details. | | | | |
| 35. | a. Have you ever been found guilty of any administrative | offense? | ☐ 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 | of any 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 | f the following modes: resignation | | | | | |
| | retirement, dropped from the rolls, dismissal, termination | | ☐ YES ☑ NO If YES, give details: | | | | |
| | (abolition) in the public or private sector? | | | | | | |
| 38. | a. Have you ever been a candidate in a national or local | Have you ever been a candidate in a national or local election held within the last year (except | | | | | |
| ٠ | Barangay election)? | olocitor floid Within the last year (except | ☐ YES ☑ NO | | | | |
| | | | If YES, give details: | | | | |
| | b. Have you resigned from the government service during | [2] [1] [1] [1] [1] [1] [1] [1] [1] [1] [1 | ☐ YES ☑ NO | | | | |
| | election to promote/actively campaign for a national or lo | cal candidate? | If YES, give details: | | | | |
| 39. | Have you acquired the status of an immigrant or perman | ent resident of another country? | ☐ YES ☑ NO | | | | |
| | | | If YES, give details (country): | | | | |
| | | | ii 120, giro dotallo (ocultu)). | | | | |
| 40. | Pursuant to: (a) Indigenous People's Act (RA 8371); (b) | Magna Carta for Disabled Parsons (DA | | | | | |
| | 7277); and (c) Solo Parents Welfare Act of 2000 (RA 89) | | | | | | |
| a. | Are you a member of any indigenous group? | 2), produce driewor the following frome. | | | | | |
| | Are you a member of any indigenous group? | | YES NO | | | | |
| b. | Are you a person with disability? | | If YES, please specify: | | | | |
| | The you a person with disability: | | ☐ YES ☑ NO If YES, please specify ID No: | | | | |
| C. | Are you a solo parent? | | | | | | |
| - | | | ☐ YES ☑ NO If YES, please specify ID No: | | | | |
| 41 | DECEDENCES (Decement related by a constant of the second | | | | | | |
| 711 | REFERENCES (Person not related by consanguinity or affinity to applic | ant /appointee) | | | | | |
| | NAME | ADDRESS | TEL. NO. | | | | |
| ENG | GR. MARIO LILIO P. VALENZONA | VISAYAS STATE UNIVERSITY, BAYBAY | 9176341514 | | | | |
| DD | LOLITO BESTIL | CITY, LEYTE | | | | | |
| DK. | LOLITO BESTIL | GUADALUPE, BAYBAY CITY, LEYTE | 9177052058 | | | | |
| | | | | | | | |
| 42. | I declare under oath that I have personally accomplished | this Personal Data Sheet which is a true as | great and complete | | | | |
| | statement pursuant to the provisions of pertinent laws | s. rules and regulations of the Republic of | the Political Control of the Control | | | | |
| | authorize the agency head / authorized representative | to verify/validate the contents stated herein | . I agree that any GERONINO TUMULAK | | | | |
| | misrepresentation made in this document and its attac | hments shall cause the filing of administrat | ive/criminal case/s PHOTO | | | | |
| | against me. | | | | | | |
| - | | | 44700 4 32 10 | | | | |
| G | Sovernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance | and the second second second second second | | | | | |
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| G | overnment Issued ID: VSU ID | | | | | | |
| ID | O/License/Passport No.: V000654 | Signature (Sign inside the box | d and a second | | | | |
| D | ate/Place of Issuance: BAYBAY CITY, LEYTE | | | | | | |
| _ | | Date Accomplished | Right Thumbmark | | | | |
| | SUBSCRIBED AND SWORN to before me this APR 2 | 7 2017 , affiant exhibit | ing his/her validly issued government ID as indicated above. | | | | |
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| | | ATTY RYSANA GUINOCOL | 7 | | | | |
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18P 103-524 TAGE 23AT CITY 12/19/16 MCLE COMP. NO. V-0009580-07/20/15