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(Continue on separate sheet if necessary)	COLLEGE	UNIVERSITY OF THE PHILIPPINES YISAYAS	BS FISHERIES		2015	2020		2020	DOST - SEI RA 7687
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Service Control	ERVICE EL			DATE OF				LICENSE (if ap	plicable)
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE (IF A)			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION	N / CONFE	RMENT	NUMBER	Date of Validity
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TO NON	J-PROFES	SSIONAL DRIVER'S LICENSE		Dec. 10, 2020	LTO ALTURAS - T	AGBILA			
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			(Continu	ue on separate sheet if n	ecessary)				
SIGNATU	JRE	Gulen one	10. Oh	ie on separate sneet ii n	DATE	2/1	8/22		

VI. VOLUNTARY WORK OR INVOLVEMEN			ENT / PEOPL	.E / VOLUNTAI	RY ORGANIZATION/S
29. NAME & ADDRESS OF ORGANIZATION (Write in full)	(mm/d	VE DATES Id/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK
Commission CONTRACTOR INSCHALLATION	From	To	Alles	INTERNI DOA	ATTIUM AACTINE OUTCOMSON
Community CENTRED LONSERVATION PHILLING: , BUSUANGA, PALAWAK	(43) 07/04/18	07/24/JR	240	MANGRUVES COMMUNITY	CTICUM/ BASELINE ASJESSMENT BEACH FOREST, SEAGRASS, IMMERSION
	(Contin	nue on separate sh	eet if necessary)		
/II. LEARNING AND DEVELOPMENT (L&E Start from the most recent L&D/training program and incl	ide only the relevan			(5) years for Division	t Chief/Executive/Managerial positions)
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	Annual State of the Control of the C	DANCE	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
3th National Shrimp Congress	11/9/21	11/11/21	24 HRS	Technical	PHILIPPINE SHRIMP INDUSTRY
	(Continu	ue on separate she	et if necessary)		
OTHER INFORMATION					
. SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)			MEMBERSHIP IN 33. ASSOCIATION/ORGANIZATION (Write in full)	
ogle Earth Digitization	Top 3 on FISHERIES TECHNOLOGIST LICENSURE EXAMINATION: 202				University a the Philippin
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SIGNATURE A	(Continu	e on separate she w D. Om	et if necessary) DA	TE	02/18/22

	<ul> <li>Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediat Bureau or Department where you will be apppointed,</li> <li>a. within the third degree?</li> <li>b. within the fourth degree (for Local Government Unit - Ca)</li> </ul>	☐ YES ☐ NO ☐ YES ☐ NO If YES, give details:						
3.	5. a. Have you ever been found guilty of any administrative of	☐ 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 a by any court or tribunal?	any law, decree, ordinance or regulation	☐ YES ☑ NO If YES, give details:					
	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, e out (abolition) in the public or private sector?	nd of term, finished contract or phased	☐ YES NO If YES, give details:					
38.	<ul> <li>a. Have you ever been a candidate in a national or local ele Barangay election)?</li> </ul>	ection held within the last year (except	☐ YES ☐ NO If YES, give details:					
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local		_					
39.	Have you acquired the status of an immigrant or permanen	t resident of another country?	☐ YES ☐ NO If YES, give details (country):					
a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972) Are you a member of any indigenous group?  Are you a person with disability?  Are you a solo parent?	☐ YES ☐ NO If YES, please specify: ☐ YES ☐ NO If YES, please specify ID No: ☐ YES ☐ NO If YES, please specify ID No:						
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)						
	NAME	ADDRESS	TEL. NO.					
Jos	SHUA M. REGALADO	JARO, 110110 47Y C+6	333) 315-90-32					
DR.	HAROLD M. MONTECLARO	MIAGAO, ILOILO C+6	333)315-90-30					
F	1. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein.  I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.							
PLE Gove ID/Li	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance  Government Issued ID: PRC  ID/License/Passport No.: 0D0429 (b  Date/Place of Issuance: 2/4/12, PRC Torgbi laran City, Bohd  Right Thumbmark							
	SUBSCRIBED AND SWORN to before me this	, affiant exhib	oiting his/her validly issued government ID as indicated above.					
		Person Administering Oa	ath.					
	r eraum Auministering Caum							

## **WORK EXPERIENCE SHEET**

Duration: May 6, 2021 - January 29, 2022

Position: Vannamei Sales Technician

Name of Office: Sales and Marketing

Immediate Supervisor: Thamaz Lee Quilantang

Name of Agency/Organization and Location: Santeh Feeds Corporation, Quezon City

## List of Accomplishments and Contribution:

 Developed Shrimp Farming Protocol, A Narrative Report on Intensive Shrimp Farming Based on the Technical Training held at Fishta Yumiya Farm, Cadiz Viejo, Cadiz City, Negros Occidental

## Summary of Actual Duties:

- Gathered, prepared, analyzed and presented reports on accurate technical data on different aspects of vannamei farming
- Provided field level technical support to Technical Sales Representatives, technicians and customers on the different aspects of vannamei farming
- Monitor feeds sales on existing customers and gathered prospect customers

GERALDIN MAE D. OLAER Applicant

Geralin Ohre & Ober

Date: March 9, 2022