- 34. Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be appointed, a. within the third degree?
- b. within the fourth degree (for Local Government Unit Care
- 35. a. Have you ever been found guilty of any administrative offe
  - 36. Have you ever been convicted of any crime or violation of ar

b. Have you been criminally charged before any court?

- by any court or tribunal?

  37. Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, en
- out (abolition) in the public or private sector?

  38. a. Have you ever been a candidate in a national or local election Barangay election)?

  b. Have you resigned from the government service during the

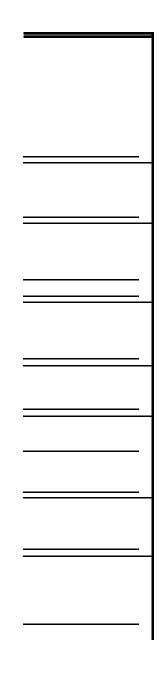
election to promote/actively campaign for a national or local

- 39. Have you acquired the status of an immigrant or permanent
- 40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),
  a. Are you a member of any indigenous group?
- b. Are you a person with disability?

C.	Are you a solo parent?				
41.	REFERENCES (Person not related by consanguinity or affinity to app	licant			
	NAME				
	MARY JANE B. CANONIGO				
	FAUSTINA C. CAINDOC				
	RIZALINO F. BELENSON				
G	42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized representation made in this doc administrative/criminal case/s against me.  Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance				
G	sovernment Issued ID: PRC				
IE	D/License/Passport No.: 1710188				
D	ate/Place of Issuance: ORMOC CITY, LEYTE/ 01/09/2019				
	SUBSCRIBED AND SWORN to before me this				

or recommending authority, or to the	
supervision over you in the Office,	
eer Employees)?	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:
ense?	☐ YES ☑ NO If YES, give details:
	☐ YES ☑ NO If YES, give details: Date Filed: Status of Case/s:
ny law, decree, ordinance or regulation	☐ YES ☑ NO If YES, give details:
e following modes: resignation, d of term, finished contract or phased	☐ YES ☑ NO If YES, give details:
ction held within the last year (except	☐ YES ☑ NO If YES, give details:
e three (3)-month period before the last candidate?	☐ YES ☑ NO If YES, give details:
resident of another country?	☐ YES ☑ NO If YES, give details (country):
na Carta for Disabled Persons (RA please answer the following items:	
	☐ YES ☑ NO If YES, please specify:
	☐ YES         ✓ NO

	If YES, please specify ID No:	
	☐ YES If YES, please speci	☑ NO fy ID No:
/appointee)		
ADDRESS	TEL. NO.	
REAL ST. POBLACION, ALBUERA LEYTE	9176507537	
STO. NOÑO ST.,POBLACION, ALBUERA LEYTE		
SAN ANDRESS, POBLACION, ALBUERA, LEYTE		
this Personal Data Sheet which is a trent laws, rules and regulations of the lesentative to verify/validate the contents ument and its attachments shall caused a Signature (Sign inside the beauty 31, 2022  Date Accomplished	Republic of the stated herein. See the filing of	
, affiant exhibiti	ng his/her validly issued	d government ID
Person Administering Oat	h	



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Right Thumbmark	
as indicated above.	