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lale	male please indicate the	details.				-		
ingle Mz Vidowed Se Other/s:	arried 17. RESIDENTIAL ADDRESS parated	SIT	N/A House/Blockf.ol No. SITIO KAWAYAN		N/A Street MAGSAYSAY			
1.6m			bdivision//illege ANGALANG		Berangey LEYTE			
	ZIP CODE		ity/Municipality		Province			
65kg	18. PERMANENT ADDRESS	W ASTA	N/A	6517	NA			
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NA NA		SIT	IO KAWAYAN	-	MAGSAYS	AY		
121333438471	THE TOTAL STREET		ANGALANG	-	LEYTE Province			
13-2502711784-0	ZIP CODE	-	City/Municipality 6517			FIORICS		
N/A	19. TELEPHONE NO.			N/A				
NA	20. MOBILE NO.							
N/A	21. E-MAIL ADDRESS (if any)		09502798760 lukebalasanos0828@gmail.com					
	21. E-WAL ADDRESS (II BIJ)	the second second	iukebalasa	311030020(@0	mair.com	or a local desired		
	NA	23. NAME of CH	LDREN (Write full name and	ist all)	DATE OF	BIRTH (mm/dd/yyyy)		
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LEYTE COLLEGES	ADMINISTRATION MAJOR	BACHELOR OF SCIENCE IN BUSINESS Administration Major in Financial Management.			2023	MAGNA CUM Laude		
N/A	NA	- Care		4	N/A	N/A		
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08/01/2023   07/31/2024   HOTEL ADMINISTRATIVE ASSISTANT   IRONWOOD HOTEL   9000.00   REGULAR   10/05/2019   09/30/2023   STUDENT'S DEAN ASSISTANT   LEYTE COLLEGES   SCHOLAR   10/05/2019   09/31/2025   PROGRAM DEVELOPMENT OFFICER & LOCAL GOVERNIMENT UNIT OF MATAGORY   CONTRACTUAL	(1	mm/dd/yyyy)						GRADE (If applicable) & STEP (Format "00-0")		GOVT SERVICE (Y/N)
10/05/2019 05/30/2023 STUDENT'S DEAN ASSISTANT LEYTE COLLEGES SCHOLAR 01/09/2025 PROGRAM DEVELOPMENT OFFICER & LOCAL GOVERNIMENT UNIT OF MATAGORY OFFICE)  08/31/2025 MANCOM SECRETARIAT MEMBER LOCAL GOVERNIMENT UNIT OF MATAGORY OFFICE)  08/31/2025 OR OFFICE)  20000.00 CONTRACTUAL  OR LEYTE (MAYOR'S OFFICE)	A CONTRACTOR	4 1000	HOTEL ADMINISTRA	TIVE ASSISTANT	IRONWO	OD HOTEL	9000 00	moresen	PEGIN AP	N
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SIGNATURE (Coptinue on separate sheet if necessary)  DATE MAY 91, 2025  CSTORALIZ (Provised 2011).		THE RESIDENCE OF		Q (Coh	tinue on separate sheet if	necessary)				

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/ PEOPLE / VO	DLUNTARY O	RGANIZATION	VS		
29. NAME & ADDRESS OF O (Write in full			VE DATES (d/yyyr) To	NUMBER OF HOURS	i ven	POSITION / NATURE OF WORK	
SANGGUNIANG KABATAAN (SK TREASURER)		5/14/2018	10/30/2023	N/A	SK TREASURER		
YOUTH MINISTRY M	EMBER	NA	N/A		EL PAGE	CHAPEL READER	
				distribution			
		7				A CONTRACTOR OF THE CONTRACTOR	
	The the second to the second						
7 - 30 - 30 - 30 - 30 - 30 - 30 - 30 - 3						17-0	
		continue on separa		n/)	- 100 1 Act		
VII. LEARNING AND DEVELOPMENT (L&D				Na/Elmina Ma			
(Start from the most recent L&D training program and inc	lude only the relevant Lab training taken i		E DATES OF	niei Executive nau	agenal positions)		
30. TITLE OF LEARNING AND DEVELOPMENT IN (Write in fi		ATTENDANCE (mm/dd/yyyy) From To		NUMBER OF HOURS	Type of LD ( Menagerial' Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
BROKE NO MORE: MASTERING, BUDGETING	FOR COLLEGE AND ADULTING	11/24/2024	11/24/2024	4HRS	TECHNICAL	NATIONAL TEACHERS COLLEGE QUIAPO MANILA PHILIPPINES	
WEBINAR "FINANCIAL MASTERY: UNLOCKING SU BUDGETING, AND INS		10/11/2024	10/11/2024	8HRS	TECHNICAL	NATIONAL TEACHERS COLLEGE QUIAPO MANILI PHILIPPINES	
LEADERSHIP TRA	INING	2023	2023	4HRS	LEADERSHIP	LEYTE COLLEGES - TACLOBAN CITY	
JOURNALISM TRAINING - ED	TORIAL WRITING	2019	2019	96HRS	WRITING	ALANGALANG AGRO INDUSTRIAL SCHOOL	
LEADERSHIP TRA	INING	2017	2017	96HRS	LEADERSHIP	RAFI COOL ADVENTURE CAMP - CEBU CITY, PHILIPPINES	
					Name of the last		
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				0.450	Kad		
	(	Continue on separa	te sheet if necessa	ny)			
VIII. OTHER INFORMATION	Bertheles Steller						
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Wile in full)					33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
HOSTING	GUEST SPEAKER - ELEMENTARY (2023)					TINAISAN ELEM, SCHOOL (ALUMNA)	
WRITING	GUE	GUEST SPEAKER - JUNIOR HIGH (2024)				TRINIDAD B. CAIDIC NATIONAL HIGH SCHOOL (ALUMNA	
and the second seco	INSPIRATIONAL SPEAKER (CAREER GUIDANCE) (2025)				ALANGALANG AGRO INDUSTRIAL SCHOOL (ALUMNA)		
					er gert Ari.	Process of the state of the sta	
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3.63	1	ontinue or separat	a sheet if nacesess	vi .			
SIGNATURE	Xand	am	331211	Total State of Paris and State of State	DATE	MM 31,2015	



Are you related by consanguinity or affinity to the appoints chief of bureau or office or to the person who has immedia Bureau or Department where you will be appointed,		MERT			
a. within the third degree?		YES [	☑ NO		
b. within the fourth degree (for Local Government Unit - C	☐ YES ☑ NO If YES, give details:				
5. a. Have you ever been found guilty of any administrative	YES VO If YES, give details:				
b. Have you been criminally charged before any court?		YES If YES, give details Date Filed: Status of Case/s:	☑ NO :		
6. Have you ever been convicted of any crime or violation of by any court or tribunal?	☐ YES ☑ NO If YES, give details:				
37. Have you ever been separated from the service in any of retirement, dropped from the rolls, dismissal, termination, out (abolition) in the public or private sector?		YES If YES, give details	☑ NO :		
38. a. Have you ever been a candidate in a national or local of Barangay election)?	election held within the last year (except	YES If YES, give details	☑ NO 3:		
<ul> <li>b. Have you resigned from the government service during election to promote/actively campaign for a national or local</li> </ul>	☐ YES If YES, give details	☑ NO			
39. Have you acquired the status of an immigrant or permand	☐ YES ☑ NO If YES, give details (country):				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) N	Magna Carta for Disabled Persons (RA				
7277); and (c) Solo Parents Welfare Act of 2000 (RA 897	(2), please answer the following items:				
Are you a member of any indigenous group?		☐ YES ☑ NO If YES, please specify:			
Are you a person with disability?		☐ YES ☑ NO			
rad you a person mar assumity t		If YES, please specify	ID No:		
Are you a solo parent?	☐ YES ☑ NO If YES, please specify ID No:				
41. REFERENCES (Person not related by consanguinity or affinity to appli	icant /appointee)				
NAME	ADDRESS	TEL. NO.	602		
KAREN E ESPIRITU	IRONWOOD HOTEL - TACLOBAN CITY	9171167392			
IAIME CATINDOV	LEYTE COLLEGES - TACLOBAN	9984055356	7.50		
JAIME CATINDOY	CITY MATAG-OB LGU - MATAG-OB,	Subject to report			
EMMERENCIANA L. TABON	LEYTE	व्याद १८८ १६न।			
42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of per Philippines. I authorize the agency head/authorized re I agree that any misrepresentation made in this d administrative/criminal case/s against me.	tinent laws, rules and regulations of the epresentative to verify/validate the content	Republic of the s stated herein.			
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance	On Meind	+401/2019ANF			
Government Issued ID: PHILHEALTH	YOUNG				
ID/License/Passport No.: 13-250271784-0	box)	A STATE OF THE STA			
Date/Place of Issuance: 09/05/2023 - TACLOBAN CITY	Date Accomplished		Right Thumbmark		
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