

## PERSONAL DATA SHEET

**WARNING:** Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned.

**READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.**

Print legibly. Tick appropriate boxes ( ) ( ) Id use separate sheet if necessary. Indicate N/A if not applicable. **DO NOT ABBREVIATE.**

1. CS ID No.

(Do not fill up. For CSC use only)

## I. PERSONAL INFORMATION

|                                  |                                                                                                                                                                                         |                                                                |                                                                                                                                                                                                  |
|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2. SURNAME                       | TAHANLANGIT                                                                                                                                                                             |                                                                |                                                                                                                                                                                                  |
| FIRST NAME                       | JESS                                                                                                                                                                                    |                                                                | NAME EXTENSION (JR., SR)                                                                                                                                                                         |
| MIDDLE NAME                      | GECAIN                                                                                                                                                                                  |                                                                |                                                                                                                                                                                                  |
| 3. DATE OF BIRTH<br>(mm/dd/yyyy) | DECEMBER 21,1998                                                                                                                                                                        | 16. CITIZENSHIP                                                | <input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship<br><input type="checkbox"/> by birth <input type="checkbox"/> by naturalization<br>Pls. indicate country: |
| 4. PLACE OF BIRTH                | CEBU CITY                                                                                                                                                                               | If holder of dual citizenship,<br>please indicate the details. |                                                                                                                                                                                                  |
| 5. SEX                           | <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female                                                                                                                |                                                                |                                                                                                                                                                                                  |
| 6 CIVIL STATUS                   | <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married<br><input type="checkbox"/> Widowed <input type="checkbox"/> Separated<br><input type="checkbox"/> Other/s: | 17. RESIDENTIAL ADDRESS                                        | LAKAS ANGKAN MINISTRIES ZONE 5<br>House/Block/Lot No. Street<br>Subdivision/Village GUADALUPE<br>Barangay BAYBAY, CITY LEYTE<br>City/Municipality Province                                       |
| 7. HEIGHT (m)                    | 1.63 m                                                                                                                                                                                  | ZIP CODE                                                       | 6521-A                                                                                                                                                                                           |
| 8. WEIGHT (kg)                   | 73 kg                                                                                                                                                                                   |                                                                |                                                                                                                                                                                                  |
| 9. BLOOD TYPE                    |                                                                                                                                                                                         | 18. PERMANENT ADDRESS                                          | PAULINO GECAIN STREET<br>House/Block/Lot No. Street<br>Subdivision/Village DAWIS NORTE<br>Barangay CARMEN CEBU<br>City/Municipality Province                                                     |
| 10. GSIS ID NO.                  | N/A                                                                                                                                                                                     | ZIP CODE                                                       | 6005                                                                                                                                                                                             |
| 11. PAG-IBIG ID NO.              | 121271233909                                                                                                                                                                            | 19. TELEPHONE NO.                                              | N/A                                                                                                                                                                                              |
| 12. PHILHEALTH NO.               | 12-250804504-0                                                                                                                                                                          | 20. MOBILE NO.                                                 | 09460365546                                                                                                                                                                                      |
| 13. SSS NO.                      | N/A                                                                                                                                                                                     | 21. E-MAIL ADDRESS (if any)                                    | jess.tahanlangit@vsu.edu.ph                                                                                                                                                                      |
| 14. TIN NO.                      | 753-787-864                                                                                                                                                                             |                                                                |                                                                                                                                                                                                  |
| 15. AGENCY EMPLOYEE NO.          | N/A                                                                                                                                                                                     |                                                                |                                                                                                                                                                                                  |

## II. FAMILY BACKGROUND

|                                           |             |                          |                                                     |                               |
|-------------------------------------------|-------------|--------------------------|-----------------------------------------------------|-------------------------------|
| 22. SPOUSE'S SURNAME                      | N/A         |                          | 23. NAME of CHILDREN (Write full name and list all) | DATE OF BIRTH<br>(mm/dd/yyyy) |
| FIRST NAME                                | N/A         | NAME EXTENSION (JR., SR) | N/A                                                 | N/A                           |
| MIDDLE NAME                               | N/A         |                          |                                                     |                               |
| OCCUPATION                                | N/A         |                          |                                                     |                               |
| EMPLOYER/BUSINESS NAME                    | N/A         |                          |                                                     |                               |
| BUSINESS ADDRESS                          | N/A         |                          |                                                     |                               |
| TELEPHONE NO.                             | N/A         |                          |                                                     |                               |
| 24. FATHER'S SURNAME                      | TAHANLANGIT |                          |                                                     |                               |
| FIRST NAME                                | EULOGIO     | NAME EXTENSION (JR., SR) |                                                     |                               |
| MIDDLE NAME                               | BOCO        |                          |                                                     |                               |
| 25. MOTHER'S MAIDEN NAME                  |             |                          |                                                     |                               |
| SURNAME                                   | GECAIN      |                          |                                                     |                               |
| FIRST NAME                                | NOEME       |                          |                                                     |                               |
| MIDDLE NAME                               | BUENO       |                          |                                                     |                               |
| (Continue on separate sheet if necessary) |             |                          |                                                     |                               |

## III. EDUCATIONAL BACKGROUND

| 26. LEVEL                                 | NAME OF SCHOOL<br>(Write in full) | BASIC EDUCATION/DEGREE/COURSE<br>(Write in full) | PERIOD OF ATTENDANCE |      | HIGHEST LEVEL/<br>UNITS EARNED<br>(if not graduated) | YEAR GRADUATED | SCHOLARSHIP/<br>ACADEMIC HONORS RECEIVED |
|-------------------------------------------|-----------------------------------|--------------------------------------------------|----------------------|------|------------------------------------------------------|----------------|------------------------------------------|
|                                           |                                   |                                                  | From                 | To   |                                                      |                |                                          |
| ELEMENTARY                                | DAWIS ELEMENTARY SCHOOL           | PRIMARY                                          | 2005                 | 2011 |                                                      | 2011           | N/A                                      |
| SECONDARY                                 | CARMEN NATIONAL HIGH SCHOOL       | SECONDARY                                        | 2011                 | 2015 |                                                      | 2015           | N/A                                      |
| VOCATIONAL /<br>TRADE COURSE              | N/A                               |                                                  |                      |      |                                                      |                |                                          |
| COLLEGE                                   | VISAYAS STATE UNIVERSITY          | BACHELOR OF ANIMAL SCIENCE                       | 2015                 | 2019 |                                                      | 2019           | N/A                                      |
| GRADUATE STUDIES                          | VISAYAS STATE UNIVERSITY          | MASTER OF SCIENCE IN ANIMAL SCIENCE              | 2020                 | 2022 |                                                      | 2022           | N/A                                      |
| (Continue on separate sheet if necessary) |                                   |                                                  |                      |      |                                                      |                |                                          |

SIGNATURE

DATE

01/09/2025

#### IV. CIVIL SERVICE ELIGIBILITY

| 27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE | RATING<br>(If Applicable) | DATE OF EXAMINATION / CONFERMENT | PLACE OF EXAMINATION / CONFERMENT | LICENSE (if applicable) |                  |
|----------------------------------------------------------------------------------------------------------------|---------------------------|----------------------------------|-----------------------------------|-------------------------|------------------|
|                                                                                                                |                           |                                  |                                   | NUMBER                  | Date of Validity |
| LICENSED AGRICULTURIST                                                                                         | 84.50%                    | NOV 22-24, 2022                  | TACLOBAN CITY, LEYTE              | 0041763                 | 12/21/2026       |
| DRIVER'S LICENSE                                                                                               | N/A                       | N/A                              | BAYBAY CITY, LEYTE                | H12-21-200544           | 12/21/2025       |
|                                                                                                                |                           |                                  |                                   |                         |                  |
|                                                                                                                |                           |                                  |                                   |                         |                  |
|                                                                                                                |                           |                                  |                                   |                         |                  |
|                                                                                                                |                           |                                  |                                   |                         |                  |
|                                                                                                                |                           |                                  |                                   |                         |                  |

(Continue on separate sheet if necessary)

## V. WORK EXPERIENCE

*(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.*

[illegible]

(Continue on separate sheet if necessary)

|                  |                                                                                     |             |            |
|------------------|-------------------------------------------------------------------------------------|-------------|------------|
| <b>SIGNATURE</b> |  | <b>DATE</b> | 01/09/2025 |
|------------------|-------------------------------------------------------------------------------------|-------------|------------|

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

| 29. | NAME & ADDRESS OF ORGANIZATION<br>(Write in full) | INCLUSIVE DATES<br>(mm/dd/yyyy) |    | NUMBER OF<br>HOURS | POSITION / NATURE OF WORK |
|-----|---------------------------------------------------|---------------------------------|----|--------------------|---------------------------|
|     |                                                   | From                            | To |                    |                           |
|     |                                                   |                                 |    |                    |                           |
|     |                                                   |                                 |    |                    |                           |
|     |                                                   |                                 |    |                    |                           |
|     |                                                   |                                 |    |                    |                           |
|     |                                                   |                                 |    |                    |                           |
|     |                                                   |                                 |    |                    |                           |
|     |                                                   |                                 |    |                    |                           |
|     |                                                   |                                 |    |                    |                           |

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)

| 30. | TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS<br>(Write in full)                    | INCLUSIVE DATES OF<br>ATTENDANCE<br>(mm/dd/yyyy) |            | NUMBER OF<br>HOURS | Type of LD<br>( Managerial/<br>Supervisory/<br>Technical/etc) | CONDUCTED/ SPONSORED BY<br>(Write in full)                                     |
|-----|---------------------------------------------------------------------------------------------------------|--------------------------------------------------|------------|--------------------|---------------------------------------------------------------|--------------------------------------------------------------------------------|
|     |                                                                                                         | From                                             | To         |                    |                                                               |                                                                                |
|     | FEEDTALKS: ECONOMIC IMPACT OF NUTRITION ON PIG PRODUCTION                                               | 11/26/24                                         | 11/26/24   |                    | TECHNICAL                                                     | INTERNATIONAL TRAINING CENTER ON PIG<br>HUSBANDRY                              |
|     | JAPANESE QUAIL PRODUCTION                                                                               | 05/26/2023                                       | 05/26/2023 |                    | TECHNICAL                                                     | INSTITUTE OF ANIMAL SCIENCE, COLLEGE OF<br>AGRICULTURE AND FOOD SCIENCE - UPLB |
|     | NUTRIENT REQUIREMENTS OF JAPANESE QUAILS: RECENT UPDATES                                                | 05/26/2023                                       | 05/26/2023 |                    | TECHNICAL                                                     | INSTITUTE OF ANIMAL SCIENCE, COLLEGE OF<br>AGRICULTURE AND FOOD SCIENCE - UPLB |
|     | POTENTIAL OF ENSILED AGRICULTURAL BY-PRODUCTS AS RUMINANT FEED                                          | 05/19/2023                                       | 05/19/2023 |                    | TECHNICAL                                                     | INSTITUTE OF ANIMAL SCIENCE, COLLEGE OF<br>AGRICULTURE AND FOOD SCIENCE - UPLB |
|     | RECENT DEVELOPMENTS IN LAYING DUCK NUTRITION                                                            | 05/19/2023                                       | 05/19/2023 |                    | TECHNICAL                                                     | INSTITUTE OF ANIMAL SCIENCE, COLLEGE OF<br>AGRICULTURE AND FOOD SCIENCE - UPLB |
|     | EFFECT OF PARTICLE SIZE AND FEED FORM ON PRODUCTION PERFORMANCE OF<br>LAYING HENS                       | 05/12/2023                                       | 05/12/2023 |                    | TECHNICAL                                                     | INSTITUTE OF ANIMAL SCIENCE, COLLEGE OF<br>AGRICULTURE AND FOOD SCIENCE - UPLB |
|     | EFFECT OF PARTICLE SIZE AND FEED FORM ON PRODUCTION PERFORMANCE OF<br>BROILER CHICKENS                  | 05/12/2023                                       | 05/12/2023 |                    | TECHNICAL                                                     | INSTITUTE OF ANIMAL SCIENCE, COLLEGE OF<br>AGRICULTURE AND FOOD SCIENCE - UPLB |
|     | EFFECTS AND FUNCTIONS OF COPPER IN PIGS                                                                 | 04/28/2023                                       | 04/28/2023 |                    | TECHNICAL                                                     | INSTITUTE OF ANIMAL SCIENCE, COLLEGE OF<br>AGRICULTURE AND FOOD SCIENCE - UPLB |
|     | COCONUT CO-PRODUCTS AS FEED INGREDIENTS                                                                 | 04/27/2023                                       | 04/27/2023 |                    | TECHNICAL                                                     | COLLEGE OF AGRICULTURE AND FOOD<br>SCIENCE - UPLB                              |
|     | ANIMAL WELFARE ACT OF 1998 RA 8485 AS AMENDED BY RA 10631 AND DA<br>ADMINISTRATIVE ORDERS AND CIRCULARS | 04/20/2023                                       | 04/20/2023 |                    | TECHNICAL                                                     | BUREAU OF ANIMAL INDUSTRY                                                      |
|     | SWINE PRODUCTION                                                                                        | 04/09/2023                                       | 04/09/2023 |                    | TECHNICAL                                                     | FARMERS TECHNOLOGY AGRICULTURAL<br>LEARNING CENTER                             |
|     | TOOLS FOR FARM FINANCIAL ANALYSIS; AN INTRODUCTION TO MICROSOFT<br>EXCEL                                | 03/23/2023                                       | 03/23/2023 |                    | TECHNICAL                                                     | COLLEGE OF AGRICULTURE AND AGRI-<br>INDUSTRIES - CARAGA STATE UNIVERSITY       |
|     | FARM ACCOUNTING: WHAT FARMERS NEED TO KNOW                                                              | 03/21/2023                                       | 03/21/2023 |                    | TECHNICAL                                                     | COLLEGE OF AGRICULTURE AND AGRI-<br>INDUSTRIES - CARAGA STATE UNIVERSITY       |
|     | CARA-ARALAN WEBINAR SERIES: GABAY SA WASTONG PANGANGALAGA NG<br>KALABAW                                 | 03/17/2023                                       | 03/17/2023 |                    | TECHNICAL                                                     | PHILIPPINE CARABAO CENTER                                                      |
|     | ARTIFICIAL INSEMINATION (SWINE)                                                                         | 02/26/2023                                       | 02/28/2023 |                    | TECHNICAL                                                     | FARMERS TECHNOLOGY AGRICULTURAL<br>LEARNING CENTER                             |
|     | BASIC FARM PLANNING STRATEGIES FOR EFFICIENT FARM MANAGEMENT                                            | 02/26/2023                                       | 02/28/2023 |                    | MANAGERIAL                                                    | FARMERS TECHNOLOGY AGRICULTURAL<br>LEARNING CENTER                             |
|     | 1-DAY ARTIFICIAL INSEMINATION FOR PORK PRODUCERS                                                        | 03/19/2021                                       | 03/19/2021 |                    | TECHNICAL                                                     | INTERNATIONAL TRAINING CENTER ON PIG<br>HUSBANDRY - DA, ATI                    |
|     | STATISTICAL ANALYSIS FOR QUANTITATIVE RESEARCH                                                          | 05/27/2021                                       | 05/27/2021 |                    | TECHNICAL                                                     | CAVITE STATE UNIVERSITY - CAVITE<br>COLLEGE OF ARTS AND TRADES                 |
|     | BACK2BASICS: UNDERSTANDING THE RUMEN WEBINAR                                                            | 02/20/2021                                       | 02/20/2021 |                    | TECHNICAL                                                     | RUMEN NUTRITION SOLUTIONS                                                      |
|     | AFRICAN SWINE FEVER UPDATES                                                                             | 11/17/2020                                       | 11/17/2020 |                    | TECHNICAL                                                     | DEPARTMENT OF SCIENCE AND TECHNOLOGY                                           |
|     | 5TH INTERNATIONAL LIVESTOCK BIOTECHNOLOGY SYMPOSIUM                                                     | 10/27/2020                                       | 10/28/2020 |                    | TECHNICAL                                                     | LIVESTOCK BIOTECHNOLOGY CENTER-<br>PHILIPPINE CARABAO CENTER                   |
|     | ORGANIC COMPLETE RATION MIX (OCRM): PROCESSING AND<br>COMMERCIALIZATION                                 | 10/20/2020                                       | 10/20/2020 |                    | TECHNICAL                                                     | DEPARTMENT OF AGRICULTURE - BUREAU OF<br>AGRICULTURAL RESEARCH                 |
|     | PHILSAN ANIMAL NUTRITION CONFERENCE                                                                     | 10/07/2020                                       | 10/21/2020 |                    | TECHNICAL                                                     | THE PHILIPPINE SOCIETY OF ANIMAL<br>NUTRITIONISTS                              |
|     |                                                                                                         |                                                  |            |                    |                                                               |                                                                                |

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

| 31. | SPECIAL SKILLS and HOBBIES | 32. | NON-ACADEMIC DISTINCTIONS / RECOGNITION<br>(Write in full)                                               | 33. | MEMBERSHIP IN<br>ASSOCIATION/ORGANIZATION<br>(Write in full)            |
|-----|----------------------------|-----|----------------------------------------------------------------------------------------------------------|-----|-------------------------------------------------------------------------|
|     |                            |     | CERTIFICATE OF RECOGNITION: PASUC-REGION VIII SCUAA, NORTHWEST SAMAR<br>STATE UNIVERSITY, SY: 2024-2025  |     | VISAYAS STATE UNIVERSITY VARSITY<br>(WOMEN'S FUTSAL TEAM - ASST. COACH) |
|     |                            |     | CERTIFICATE OF RECOGNITION: PASUC-REGION VIII SCUAA, VISAYAS STATE<br>UNIVERSITY, SY: 2023-2024          |     | VISAYAS STATE UNIVERSITY VARSITY<br>(WOMEN'S FUTSAL TEAM - ASST. COACH) |
|     |                            |     | CERTIFICATE OF RECOGNITION: PASUC-REGION VIII SCUAA, BILIRAN PROVINCE<br>STATE UNIVERSITY, SY: 2019-2020 |     | VISAYAS STATE UNIVERSITY VARSITY<br>(WOMEN'S FUTSAL TEAM - COACH)       |
|     |                            |     | CERTIFICATE OF RECOGNITION: PASUC-REGION VIII SCUAA, EASTERN SAMAR<br>STATE UNIVERSITY, SY: 2018-2019    |     | VISAYAS STATE UNIVERSITY VARSITY<br>(MEN'S FOOTBALL TEAM - ATHLETE)     |
|     |                            |     | CERTIFICATE OF RECOGNITION: PASUC-REGION VIII SCUAA, VISAYAS STATE<br>UNIVERSITY, SY: 2017-2018          |     | VISAYAS STATE UNIVERSITY VARSITY<br>(MEN'S FOOTBALL TEAM - ATHLETE)     |
|     |                            |     | CERTIFICATE OF RECOGNITION: PASUC-REGION VIII SCUAA, NAVAL STATE<br>UNIVERSITY, SY: 2016-2017            |     | VISAYAS STATE UNIVERSITY VARSITY<br>(MEN'S FOOTBALL TEAM - ATHLETE)     |
|     |                            |     |                                                                                                          |     |                                                                         |

(Continue on separate sheet if necessary)

|           |                                                                                     |      |            |
|-----------|-------------------------------------------------------------------------------------|------|------------|
| SIGNATURE |  | DATE | 01/09/2025 |
|-----------|-------------------------------------------------------------------------------------|------|------------|

| <p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>                                                                                                                                                                                                                                                 | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>                                                                                                                                                                    |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|---------------------------------------|----------|------------------------------------------|--------------------------|---------------------------------------------------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------|--------------------------|-------------|
| <p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>Status of Case/s: _____</p>                                                                         |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| <p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>                                                                                                                                                                                                                                               |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| <p>37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?</p>                                                                                                                                                                                                                                                                                                                                                                              | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>                                                                                                                                                                                                                                               |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| <p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?</p>                                                                                                                                                                                                                                                                                                                   | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>                                                                                                                                 |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| <p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>                                                                                                                                                                                                                                     |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| <p>40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>                                                                                                                                                                                                                                                                                                  | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| <p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>JULIUS V. ABELA</td> <td>VISAYAS STATE UNIVERSITY</td> <td>09208553990</td> </tr> <tr> <td>SHALOM GRACE C. SUGANO</td> <td>VISAYAS STATE UNIVERSITY</td> <td>09122654495</td> </tr> <tr> <td>ROGER ROQUE E. BUSTAMANTE</td> <td>VISAYAS STATE UNIVERSITY</td> <td>09186752252</td> </tr> </tbody> </table> |                                                                                                                                                                                                                                                                                                                                                             | NAME                      | ADDRESS                               | TEL. NO. | JULIUS V. ABELA                          | VISAYAS STATE UNIVERSITY | 09208553990                                             | SHALOM GRACE C. SUGANO | VISAYAS STATE UNIVERSITY                                                                                                                                                                                                                                                                                                                | 09122654495                         | ROGER ROQUE E. BUSTAMANTE            | VISAYAS STATE UNIVERSITY | 09186752252 |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ADDRESS                                                                                                                                                                                                                                                                                                                                                     | TEL. NO.                  |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| JULIUS V. ABELA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | VISAYAS STATE UNIVERSITY                                                                                                                                                                                                                                                                                                                                    | 09208553990               |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| SHALOM GRACE C. SUGANO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | VISAYAS STATE UNIVERSITY                                                                                                                                                                                                                                                                                                                                    | 09122654495               |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| ROGER ROQUE E. BUSTAMANTE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VISAYAS STATE UNIVERSITY                                                                                                                                                                                                                                                                                                                                    | 09186752252               |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| <p>42. 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.</p>                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                             |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> <td>PLEASE INDICATE ID Number</td> </tr> <tr> <td>Government Issued ID: <b>PASSPORT</b></td> <td></td> </tr> <tr> <td>ID/License/Passport No. <b>P0601062B</b></td> <td></td> </tr> <tr> <td>Date/Place of Issuance: <b>FEB 8, 2019/DFA TACLOBAN</b></td> <td></td> </tr> </table>                                                                                                                                                                                         | Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)                                                                                                                                                                                                                                                                                 | PLEASE INDICATE ID Number | Government Issued ID: <b>PASSPORT</b> |          | ID/License/Passport No. <b>P0601062B</b> |                          | Date/Place of Issuance: <b>FEB 8, 2019/DFA TACLOBAN</b> |                        | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 100px; text-align: center; vertical-align: middle;"> <br/>           Signature (Sign inside the box)         </td> </tr> <tr> <td style="text-align: center;"> <b>01/11/24</b><br/>           Date Accomplished         </td> </tr> </table> | <br>Signature (Sign inside the box) | <b>01/11/24</b><br>Date Accomplished |                          |             |
| Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | PLEASE INDICATE ID Number                                                                                                                                                                                                                                                                                                                                   |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| Government Issued ID: <b>PASSPORT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                             |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| ID/License/Passport No. <b>P0601062B</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                             |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| Date/Place of Issuance: <b>FEB 8, 2019/DFA TACLOBAN</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                             |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| <br>Signature (Sign inside the box)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                             |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| <b>01/11/24</b><br>Date Accomplished                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                             |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |
| <p style="text-align: center;">SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; width: 300px; height: 60px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                             |                           |                                       |          |                                          |                          |                                                         |                        |                                                                                                                                                                                                                                                                                                                                         |                                     |                                      |                          |             |

PHOTO

Right Thumbmark