Revised 2017	THE REPORT TO THE PARTY TO THE	PERSC	NAL DAT	A SH	EET		BOARD/BAR) DIADER		
ARNING: Any misrepresentati	ion made in the Personal Data S	heet and the Work	Experience Sheet shall cause to	he filing of admi	inistrativo/crim	ninal caso/o	against the person	PINTINOO 30N	AREER SER
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nt legibly. Tick appropriate boxes	(nd use separate sheet if nece	essary. Indicate N/A if	not applicable. DO NOT ABBRE	VIATE.	2010a 20	1. CS ID No		(Do not fil u	p. For CSC use of
<i>PERSONALE INFORMATI</i> . Surname	MAGUATE								
FIRST NAME	NOEL JOHN IAN FEBEN		-	-			NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME									
DATE OF BIRTH	SAUSAL		1						
(mm/dd/yyyy)	1/20/97	16. CITIZENSHIP		Filipino Dual Citizenship					
4. PLACE OF BIRTH	СОТАВАТО	CITY	If holder of dual citiz	enship,	Pls. indicate of		by naturalization		
5. SEX	✓ Male	Female	please indicate the	details.	Philipp	ninos			- 1-
6 CIML STATUS	✓ Single Widowed	Married Separated	17. RESIDENTIAL ADDRESS	Но	ouse/Block/Lot No		PU	ROK MALIPAY Street MAKING	ON
HEIGHT (m) 40 BUTATE	Other/s:	YSBYRACIO	DITIO (YOKED) (TICATHATA		Subdivision/Village	tr Konnoo		Barangay	M00.10M
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PHILHEALTH NO.	N/A		ZIP CODE		City/Municipality 9604			Province	The
. SSS NO.	N/A		19. TELEPHONE NO.				N/A		
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FAMILY BACKGROUN	N/A	A CONTRACTOR OF THE PARTY OF TH	21. E-MAIL ADDRESS (# any)		noeljol	nnianfebe	enmaquate@g	mail.com	
SPOUSE'S SURNAME	N/A			23. NAME of CHI	ILDREN (Write fo	ul name and i	et all	DATE OF BU	RTH (mm/dd/yyyy)
FIRST NAME			NAME EXTENSION (JR., SR)	N/A	CONCU (VIIIO II		~ • •	DATE OF BI	CTH (mindayyyy)
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TELEPHONE NO.									+
FATHER'S SURNAME		MAGUATE							
FIRST NAME	NOEL		NAME EXTENSION (JR., SR) N/A						
MDDLE NAME		MAYOLA							-
MOTHER'S MAIDEN NAME									-
SURNAME		SAUSAL							
FIRST NAME	LENIE								
MIDDLE NAME		TALIÑO					(Continue on separate sheet if necessary)		
EDUCATIONAL BACK	GROUND						The same and the		
LEVEL	NAME OF SCHO (Write in full)		BASIC EDUCATION/DEGREE/COURSE (Write in full)		PERIOD OF AT	TTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
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SECONDARY	NOTRE DAME OF PA	RANG INC.	HIGH SCHOOL		2010	2014	N/A	2014	VALEDICTO IAN
VOCATIONAL / TRADE COURSE			N/A		N/A	N/A	N/A	N/A	N/A
COLLEGE	AND A VALUE OF THE PROPERTY OF	MINDANAO STATE UNIVERSITY-ILIGAN INSTITUTE OF TECHNOLOGY		BACHELOR OF SCIENCE IN BIOLOGY MAJOR IN GENERAL BIOLOGY		2018	N/A	2018	DOST & CUM
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ADUATE STUDIES			DOCTOR OF PHILOSOPHY	IN BIOLOGY	2020	2024	N/A	2024	DOST/ BEST DISSERTATION

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY		RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	DI ACE OF EVALUATION / CONFEDRENT		RMENT	LICENSE (if a	pplicable) Date of	
ELIGIBILITY / DRIVER'S LICENSE CAREER SERVICE COMMISSION (PD907)-HONOR				44440	1/11/19 CAGAYAN [Validity
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WORK	EXPERIENCE	28410	allings (C	ontinue on separate sheet h	fnecessary)				
nclude pri	vate employment	Start from your recent wo.	rk) Description of	duties should be indica	ated in the attached Work	Experience	she		以明明点 科 拉
	CLUSIVE DATES (mm/dd/yyyy)	POSITION TIT (Write in ful/Do not a		The second secon	NCY / OFFICE / COMPANY Do not abbreviate)	MONTHLY SALARY	SALARY/JOB/PAY GRADE (fapplæble)& STEP (Format*00-0*)/ NCREMENT	STATUS OF APPOINTMENT	GOVT SERVIO
3/17	7/21/17	SUMMER PRATICAL TRA		DEPARTMENT	OF SCIENCE AND	N/A	N/A	ON THE JOB	Y
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SIGNA	ATURE	Men	1		DATE	6	June 25	. 2024	SIGN

29.	NAME & ADDRESS OF OR		The second secon	USIVE DATES		hoh	POSITION / MATRIDE OF WORK
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I. LEARNING A	ND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING			oces with		Campo with the sound of the same of the sa
. TITLE OF	LEARNING AND DEVELOPMENT INTE		AT	SIVE DATES OF TENDANCE	NUMBER OF HOURS	Type of LD (Managerial/	CONDUCTED/ SPONSORED BY
	(Write in full		170	nm/dd/yyyy)	NUMBER OF HOURS	Supervisory/ Technical/etc)	(Write in full)
IZEN SCIENCE WOR	KSHOP: SAVING MR. MOM: KNOV	VING AND CONSERVING SEAHORSES	From 4/30/24	4/30/24	••	DEL EVANT	DEPARTMENT OF BIOLOGICAL SCIENCES, MINDANAO STATE UNIVER
DANAO BANKING ACTIVITIE	S: SHOWCASING EXPERIENCES	AND BEST PRACTICES FROM	DO DUBJEA	0.01 billione 3	8.0	RELEVANT	ILIGAN INSTITUTE OF TECHNOLOGY(MSU-IIT)
ERNTATIONAL HUM	IAN BIOBANKS.		4/8/24	4/8/24	2.0	RELEVANT	PHILIPPINE GENOME CENTER (PGC) UP Manila
	JALITATIVE RESEARCH METHOD CH DESIGN AND ANALYSIS	OLOGIES: GENERAL PRINCIPLES OF	3/18/24	3/18/24	4.0	RELEVANT	UNIVERSITY OF THE PHILIPPINES LOS BANOS, PROJECT MOD
EASE MODELLING	APPLICATIONS OF STEM CELL T	ECHNOLOGY IN THE PHILIPPINES	1/10/24	1/10/24	8.0	RELEVANT	PREMIER RESEARCH INSTITUTE OF SCIENCE AND MATHEMATICS (PR MINDANAO STATE UNIVERSITY-ILIGAN INSTITUTE OF TECHNOLOGY
RODUCTION TO BIO	INFORMATICS AND LINUX COMM	AND LINE TRAINING	10/23/22	10/23/22	8.0	RELEVANT	PHILIPPINE GENOME CENTER (PGC) MINDANAO
		INTELLECTUAL PROPERTY RIGHTS	10/18/21	10/18/21	3.0	RELEVANT	DEPARTMENT OF BIOLOGICAL SCIENCES, MINDANAO STATE UNIVER
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		a) and but dark vent a			32.0	RELEVANT	AND USE COMMITTEE PREMER RESEARCH INSTITUTE OF SCIENCE AND MATHEMATICS (PR
MPOSIUM ON 4C'S: C	CROCODILE, CONSERVATION, CU	LTURE, AND COEXISTENCE	3/3/20	3/3/20	3.0	RELEVANT	MINDANAO STATE UNIVERSITY-ILIGAN INSTITUTE OF TECHNOLOGY
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		Il YES, please specify:					Are you a person with disability?
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OF FORM PLE PROCESS AND PROPERTY OF

34.	Are you related by consanguinity or affinity to the appointing or rechief of bureau or office or to the person who has immediate sup Bureau or Department where you will be apppointed,	ecommending authority, or to the ervision over you in the Office,	NOT CONGRESSION	RESIDENT A HAVE			
	a. within the third degree?	The state of the s	YES V	NO			
	b. within the fourth degree (for Local Government Unit - Career E	mployees)?	☐ YES ☑	NO			
			If YES, 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?						
	b. have you been criminally charged before any count?		If YES, give details:	NO			
			Date Filed:				
		course it with all coarses gritted.	Status of Case/s:				
36.	Have you ever been convicted of any crime or violation of any law	, decree, ordinance or regulation by	☐ YES √	l no			
	any court or tribunal?	45 CT AT 1518U-0HT	If YES, give details:	Process on the state of the sta			
	of energy and analysis of energy and ene	O Assessed Strategistering	(Jac	gay) Kasun awan niwa disebakan ana hiri			
37.	Have you ever been separated from the service in any of the following		YES 7	NO JIM SMYAS HOHERMOW SOMBOS KED			
	dropped from the rolls, dismissal, termination, end of term, finishe the public or private sector?	d contract or phased out (abolition) in	IFYES, give details:	MANAGO AMMONG ACTIVITIES, SHOWCASING EXPENSE			
38.	a. Have you ever been a candidate in a national or local election Barangay election)?	held within the last year (except	YES 30 83100 1000	LITATIVE RESERVED COMMITTATIVE RESE			
	THE BY AND THE PERSON IN PRINCIPAL OF MACHINE AND SANTILLANDING.	as (2) month poried before the least	If YES, give details:				
	 b. Have you resigned from the government service during the three election to promote/actively campaign for a national or local cand 		If YES, give details:	NO ONLY BOLLY WAS CLAMB OF HOLDING			
39.	Have you acquired the status of an immigrant or permanent resid	ent of another country?	□ YES □	ISSUES IN BIOLOGICAL RESEARCHE ON [V			
	PELEVANT OF THE PARTHERS, HISTOTOPIAL ANNAL CA	12021 12021 120	If YES, give details (count				
40.	Demonstration of the second of	post gar	SOMETHING COUNTY DOLL NO. W.	POSIDIR ON ACES CIRCUMS A CONDITION OF			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Ca and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answ	er the following items:		OUTHOW TRAINING AND WORKSHOP			
a.	Are you a member of any indigenous group?	na mana erasu	MAKEORY TIP	PPINE HED CHOSS: LEADERSHIP DEVEL COM			
	ACCUMENT SONOTHER ACCUMENT		If YES, please specify:	√ NO			
D.	Are you a person with disability?		YES [√ NO			
			If YES, please specify ID No.				
	Are you a solo parent?		If YES, please specify ID No:	√ NO			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /appoin	tee)					
-	NAME	ADDRESS	TEL. NO.				
	Sharon Rose M. Tabugo, PhD., LPT	lligan City	09171100599				
	Olive A. Amparado, PhD.	lligan City	09177213694				
	Joey Genevieve T. Martinez, DSc.	Iligan City	09177014920	13/			
42.	I declare under oath that I have personally accomplished this Pe	rsonal Data Sheet which is a true, corre	ect and complete				
1	statement pursuant to the provisions of pertinent laws, rules and rules	egulations of the Republic of the Philip					
	the agency head/authorized representative to verify/validate misrepresentation made in this document and its attachments	the contents stated herein.	agree that any	THE Y			
	against me.	shall cause the hing of administrativ	e/criminal case/s	The Secretary Children Ho			
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ID/I	License/Passport No.: 6129-4216-3769-1739	(xc					
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1	SUBSCRIBED AND SWORN to before me this	afflant exhibiting	his/her validly issued governmen	nt ID as indicated above.			
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