PERSONAL DATA SHEET

T15361519

Print legibly. Mark appropriate boxes I. PERSONAL INFORMA			eparate sheet	if necessa	ry.		1. CS	ID No.				(to be filled up by CSC)	
2. SURNAME	ITAE												
FIRST NAME	FLORA MAY												
MIDDLE NAME	PALCO 3. NAME EXTENSION (e.g. Jr., Sr.)												
4. DATE OF BIRTH (mm/dd/yyy					16. RESIDENTIAL ADDRESS Biasong, CITY OF BAYBA								
5. PLACE OF BIRTH	Bias	ong, Baybay			-								
6. SEX	-		 ▼ FEMALE		-								
7. CIVIL STATUS						ZIP CODE	6521	6521					
] Widowed] Separated	ı									
	_	_	Others, sp		17. TELEPHON			09071726053 Biasong, CITY OF BAYBA					
				_	18. PERMANEN	II ADDRESS	Biase	ong, (CITY OF BA	AYBAY, LE	YTE		
8. CITIZENDSHIP	Filip	ino											
9. HEIGHT (m)	1.5												
10. WEIGHT (kg)	49 k	g			ZIP CODE			6521					
11. BLOOD TYPE	0+				19. TELEPHONE NO.			09071726053					
12. GSIS ID NO.	N/A				20. EMAIL ADDRESS (if any)			itablefloramay@gmail.com					
13. PAGIBIG ID NO.	N/A				21. CELLPHONE NO. (if any)			09071726053					
14. PHILHEALTH NO.	120513853446				22. AGENCY EMPLOYEE NO.			N/A					
15. SSS NO.	15. SSS NO. N/A				23. TIN			N/A					
II. FAMILY BACKGROU	IND												
24. SPOUSE'S SURNAME						25. NAME OF	CHILD (W	/rite ful	I name and list	all) C	ATE O	F BIRTH (mm/dd/yyyy)	
FIRST NAME	FIRST NAME					ve I. Nopa	I. Nopal				06 / 05 / 2015		
MIDDLE NAME						Sweet Divin	e I. Nopa	l				05 / 05 / 2017	
OCCUPATION													
EMPLOYER/BUS. NAME													
BUSINESS ADDRESS													
TELEPHONE NO.													
(Cont	inue on	separate shee	t if necessar	y) 									
26. FATHER'S SURNAME		Itable											
FIRST NAME Hermelino													
MIDDLE NAME Calderon													
27. MOTHER'S MAIDEN NAME													
MOTHER'S SURNAME		Palco											
FIRST NAME Luz													
MIDDLE NAME		Agoylo											
III. EDUCATIONAL BAC	CKGR	OUND											
LEVEL	NAME OF SCHOOL (Write in full)		DEGREE COURSE (Write in full)		YEAR GRADUATED (if graduated)	GRAD LEVEL/ U EARN	HIGHEST GRADE/ LEVEL/ UNITS EARNED (if not	INCLUSIVE DATES OF ATTENDANCE		- 1	HOLARSHIP/ ACADEMIC HONORS RECEIVED		
						graduated)	From	То					
ELEMENTARY	Hipus	sngo Elementa	ry School			2006			2001/06/01	2006/03/3)	N/A	
SECONDARY	Baybay National High School				2010			2006/06/01	2010/03/3		N/A		
VOCATIONAL/ TRADE COURSE	DE N/A		N/A		N/A			N/A	N/A		N/A		
COLLEGE	Visayas State University		Bachelor of Secondary Education		2014	2014		2010/06/01	2014/05/09	9	N/A		
GRADUATE STUDIES	N/A				N/A	N/A	N/A	A	N/A	N/A		N/A	

29. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE				DATE OF					LICENSE	LICENSE (if applicable)		
			RATING	EXAMINATION / PLACE OF EX CONFERMENT			MINATION /	CONFERMENT	NUMBER	DATE OF RELEASE		
LET (LICENSURE EXAMINATION FOR TEACHER)			77.0	03 / 29 / 2015	Cebu City				1747924	05/27/2015		
V. WORK EX	PERIENCE											
	(mm/dd/yyyy)		LE (Write in full)	1			MONTHL SALAR	; STEP	STATUS OF APPOINTMENT	GOV'T SERVICE (Yes / No)		
From To				SALF			SALAR	INCREMEN (Format "00-		(1637140)		
06/13/2016	03/30/2019	Tea	icher	Acedilla Tech	nnological Institute Php 9,000		0 - 0	Contractual	No			
	1						l			I		
VI. VOLUNTA	ARY WORK O	R INVOLVEMEN	NT IN CIVIC / NO	N-GOVERNM	ENT / PE	OPLE /	VOLUN'	TARY ORGA	NIZATION/S			
31. NAME & ADDRESS OF ORGANIZATION					INCLUSIVE DATES (mm/dd/yyyy)			NUMBER OF	POSITION / NATURE OF WORK			
	(Write in full)					-	То	HOURS				
N/A	N/A					١	I/A	N/A	N	N/A		
VII. TRAININ	G PROGRAMS	S (Start from the	e most recent tr	raining.)								
32. TITLE OF SEMINAR/CONFERENCE/WORKSHOP/SHORT COURSES					INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)					CONDUCTED/ SPONSORED BY (Write in full)		
(Write in full)				Fre	om	-	То	l HOURS	(vviic	(**************************************		
N/A				N	/A	N	I/A	N/A	N/A			
VIII. OTHER	INFORMATIO	v							·			
33. SPE	CIAL SKILLS / HOI	BBIES: 34.	34. NON-ACADEMIC DISTINCTIONS / RECOGNITION: 35. MEMBERSHIP IN ASSOCIATION / ORGANIZATION (Write in full)									
Reading, playing badminton, eating					N/A			N/A				

36.	Are you related by consanguinity or affinity to any of the							
a.	Within the third degree (for National Government Empappointing authority, recommending authority, chief or has immediate supervision over you in the Office, Bur appointed?	☐ YES ☑ NO If YES, give details:						
b.	Within the fourth degree (for Local Government Emploappointing authority or recommending authority where	☐ YES ☑ NO If YES, give details:						
37.	a. Have you ever been formally charged?	☐ YES ☑ NO If YES, give details:						
	b. Have you ever been guilty of any administrative off	☐ YES ☑ NO If YES, give details:						
38.	Have you ever been convicted of any crime or violatic regulation by any court or tribunal?	☐ YES ☑ NO If YES, give details:						
39.	Have you ever been separated from the service in any retirement, dropped from the rolls, dismissal, terminat or phased out, in the public or private sector?	☐ YES ☑ NO If YES, give details:						
40.	Have you ever been a candidate in a national or local	☐ YES ☑ NO If YES, give details:						
41.	Pursuant to: (a) Indigenous People's Act (RA 8371); (7277); and (c) Solo Parents Welfare Act of 2000 (RA	b) Magna Carta for Disabled Persons (RA 8972), please answer the following items:						
a.	Are you a member of any indigenous group?	☐ YES ☑ NO If YES, please specify:						
b.	Are you differently abled?	☐ YES ☑ NO If YES, please specify:						
c.	Are you a solo parent?	✓ YES □ NO If YES, please specify:						
42.	REFERENCES (Person not related by consanguinity	or affinity to applicant / appointee)						
	NAME	ADDRESS	TEL. NO.					
Ma	aria Jesusa P. Gorre	Baybay City	09198942331					
Ce	elsa D. Rabago	Plaridel, Baybay	09487224882					
Sc	onny Boy Nopal	Biasong, Baybay	09169933588					
43.	3. I declare under oath that this Personal Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines.							
	I also authorize the agency head / authorized represe this information shall remain confidential.	ntative to verify / validate the contents stated	I herein. I trust that	РНОТО				
	22000246 COMMUNITY TAX CERTIFICATE NO.							
	Baybay City							
	ISSUED AT	SIGNATURE (Sign inside t	he box)					
	2019-02-01	02 / 11 / 2019						
	ISSUED ON (mm/dd/yyyy)	DATE ACCOMPLISHE	RIGHT THUMBMARK					
	DATE ACCOMPLISHED							