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34. Are you related by consanguinity or affinity to the appointin chief of bureau or office or to the person who has immediat		DO HON OND HIT	VOLUMBAR WORK OF TWO CVEREN		
Bureau or Department where you will be apppointed,	a supervision or any year and onlines,	HOTAGHUGHO			
a. within the third degree?	a. within the third degree?				
b. within the fourth degree (for Local Government Unit - Ca	reer Employees)?	YES ☑ NO If YES, give details	HONE		
as a blace you goes been found quilty of any administrative of	Honoo?	YES 2 NO			
 a. Have you ever been found guilty of any administrative of 	neriser	If YES, give details			
b. Have you been criminally charged before any court?		YES NO			
		If YES, give details			
		Date Filed: Status of Case/s:			
36. Have you ever been convicted of any crime or violation of a		YES V NO			
36. Have you ever been convicted of any crime or violation of a by any court or tribunal?	arry law, decree, ordinance or regulation	If VEC give details			
		If YES, give details:			
37. Have you ever been separated from the service in any of the		YESNO			
retirement, dropped from the rolls, dismissal, termination, e		If YES, give details	THE PERSON CHECKING AND TO THE		
out (abolition) in the public or private sector?		YES FINISHED CA	NTRACT IN VSU		
38. a. Have you ever been a candidate in a national or local ele	ection held within the last year (except	NEC.	FINSHING COURSE FOR CAL		
Barangay election)?	20 2000	YESf YES, give @tail	lo		
b. Have you resigned from the government service during t					
election to promote/actively campaign for a national or loca		YESIf YES, give @tail	10		
39. Have you acquired the status of an immigrant or permaner	nt resident of another country?	If YES, give details (country):			
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	agna Carta for Disabled Persons (RA	YES 2 1	10		
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)					
Are you a member of any indigenous group?		YES I			
b. Are you a person with disability?		If YES, please specify YES			
Are you a person with disability?		If YES, please specify			
c. Are you a solo parent?		If YES, please specify	ID No:		
41. REFERENCES (Person not related by consanguinity or affinity to applican	it /appointee)				
NAME	ADDRESS	TEL. NO.			
DR. ELIZABETH S. QUEVEDO	VSU, BAYBAY CITY, LEYTE	563-7747			
PROF. JACOB GLENN F. JANSALIN	VSU, BAYBAY CITY, LEYTE	09178956285			
MS. HELEN GRACE F. ORACION	VSU, BAYBAY CITY, LEYTE	9091013905			
42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized reprint I agree that any misrepresentation made in this document administrative/criminal case/s against me.	nent laws, rules and regulations of the resentative 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			W. VANHO-WIRSHITO		
Government Issued ID: 06-2021939-4	gealnes		SECON BRUSH MOSES		
ID/License/Passport No.: H12-11-002046	Signature (Sign inside the b		MOTEURO TACADARAN OT 2 MACA		
Date/Place of Issuance: 2/3/2017 - BAYBAY CITY LEYTE	OX)	Right Thumbmark			
SUBSCRIBED AND SWORN to before me this	Date Accomplished , affiant exhibit	ting his/her validly issued	government ID as indicated above.		
	Person Administering Oa	th			
1000 - W - A 3000	males /:		SIGNATURE		

PERSONAL DATA SHEET

MINUTES Any misrepresentation made in the Personal Data Sheet and the Mont Experience Sheet shall cause the filling of ediministrative/criminal case's against the person concerned.

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