Revised 2017	DE	Deal	IAL DAT	л си					
	PE	:K501	NAL DAT	A SH	EEI				- 1
	ation made in the Personal Da	ata Sheet and the	Work Experience Sheet s	hall cause the	filing of ad	ministrativ	e/criminal case/s	against the p	person
	TO FILLING OUT THE PERSO		The state of the s						1000
Print legibly. Tick appropriate boxe I. PERSONAL INFORMATION I. PERSONAL INFORMATION II. PERSONAL INFORMATION II. PERSONAL INFORMATION III. PERSONAL IN	s ([_]) and use separate sheet if ne	cessary. Indicate N	/A if not applicable. DO NOT A	BBREVIATE.		1. CS ID No.		(Do not m up. F	or CSC use only)
2 SURNAME	SUDARIA								
FIRST NAME	KERRY						NAME EXTENSION (JR.	SR)	
MIDDLE NAME	UY				_		W		
3. DATE OF BIRTH	13/03/1994		16 CITIZENSHIP						
(mm/dd/yyyy)	13/03/1804		IV. OTIZZNOTIP		J Filipir	10	Dual Citizenship	by naturaliz	ation
4. PLACE OF BIRTH	BAYBAY CITY, L	EYTE	If holder of dual citize	iship,		Pls. indicate country:		10011	
5. SEX	Male	√ Female	please indicate the d	etais.	Philippir	-			
6 CIVIL STATUS	Single	√I tarried	17. RESIDENTIAL ADDRESS		NOR L			GSAYSAY AVENUE	
U GIVIL STATUS	Vidowed	Separated		Hous	e/Block/Lat No	2,		Street ZONE 10	
	other/s:				division/Village			Barangay	
7. HEIGHT (m)	1.6				AYBAY CITY y/Municipality			LEYTE Province	
8. WEIGHT (lig)	47.5		ZIP CODE		6521				
9. BLOOD TYPE	A+	manufan	18. PERMANENT ADDRESS	Lieve				AGSAYSAY AVENUE Street	
10. GSIS ID NO.	2005985482	2	House		ise/Block/Lat No.			ZONE 10	
T TO THE PARTY	A. 15, 303, 303	110			odivision/Village			Barangay LEYTE	
11. PAG-IBIG ID NO.	1211-6842-7116		City		ty/Municipality			Province	
12. PHILHEALTH NO.	13-050183761-0		ZIP CODE			6521			
13. SSS NO.	34-5862179-5		19. TELEPHONE NO.		NA NA				
14. TIN NO.	330-296-717		20. MOBILE NO.	09286854901 / 09359454204					
15. AGENCY EMPLOYEE NO.			21. E-MAIL ADDRESS (if any)	kerryu		y@gmail.com			
II. FAMILY BACKGROUND				Septiment of the second	VALSED I	1949 X			
22. SPOUSE'S SURNAME		SUDARIA		23. NAME of CHII	LDREN (Write	full name and	list all)	DATE OF BIRT	'H (mm/dd/yyyy)
FIRST NAME	LETUZ		NAME EXTENSION (JR., SR)	NA		NA			
MIDDLE NAME	MAUSISA								
OCCUPATION	SCIENCE RESEARCH SPECIALIS		ECIALIST I						
EMPLOYER/BUSINESS NAME	DA - PHILIPPIN	DA - PHILIPPINE CARABAO CENTER @ VSU							
BUSINESS ADDRESS	VISCA, BAYBAY CITY, LEYTE		LEYTE						
TELEPHONE NO.	NA NA								
24. FATHER'S SURNAME		UY					16		
FIRST NAME	ROE	NA.							
MIDDLE NAME		YU							
25. MOTHER'S MAIDEN NAME									
SURNAME		BALILI							
FIRST NAME		NIDA							
MIDDLE NAME		RAPAS			(C	ontinue on se	parate sheet if neces	sary)	
III. EDUCATIONAL BACK	GROUND								
26.	NAME OF SCHO	OL	BASIC EDUCATION/DEGR	EE/COURSE	PERIOD OF A	ATTENDANCE	HIGHEST LEVEL/	YEAR	SCHOLARSHIP/ ACADEMIC
LEVEL	(Write in full)		(Write in full)				(If not graduated)	GRADUATED	HONORS RECEIVED
ELEMENTARY	GRACE CHRISTIAN S	SCHOOL	PRIMARY EDUCATION		2001	2007	GRADUATED	2007	WITH HONORS
OLCONIC POR	VISAYAS STATE UNIVERSITY L	ABORATORY HIGH	High const		98757500	10.000.00			
SECONDARY	SCHOOL		HIGH SCHOO		2007	2011	GRADUATED	2011	WITH HONORS
VOCATIONAL / TRADE COURSE									
COLLEGE	VISAYAS STATE UNI	VERSITY	BACHELOR OF SCIENCE IN	AGRIBUSINESS	2011	2015	GRADUATED	2015	
GRADUATE STUDIES	VISAYAS STATE UNI	VERSITY	MASTER OF MANAGEMENT II MANAGEMEN		2017	2019	GRADUATED	2019	
		- (0	Continue on separate sheet if ne						
SIGNATURE	A	flake]	/		DATE December 21, 2022				122

CARE	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER		RATING	DATE OF			LICENSE (if applicable)		
BA	SPECIAL LA RANGAY ELIGIBIL	WS/ CES/ CSEE ITY / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINAT	ON / CONFER	MENT	NUMBER	Date of Validity
Career S	Service (Profesi Eligib	sional) Second Level	80.6	18/10/2015	Tacloba	n City		THE REPORT OF	
3-3474		an and the second second second					- Only La PA		
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-		and Daren				16%			
Oll						- 144			
		-	estante:	MRY THE ALL	-		w. C.		
V. WORKE	EXPERIENCE		(Ci	ontinue on separate sheet if	necessary)				
		nt. Start from your recent	work) Description	of duties should be in	dicated in the attached W	ork Experie	ALCOHOL: NAME OF TAXABLE PARTY.		
	USIVE DATES mr/dd/yyyy)	POSITION T (Write in full/Do not			ICY / OFFICE / COMPANY lo not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (If applicable)& STEP (Format "00-0")/ NCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/ N)
01/12/2021	PRESENT	Customer Ass	ociate	Landbank of	the Philippines	37,317.00	PG 5	PERMANENT	Y
16/01/2017	31/05/2017	Geographic Information Sy			VERSITY PHIL-LIDAR II	10,000.00	NA	CONTRACTUAL	Y
15/04/2016	31/10/2016	Store Speci	and the second		TELECOM	12,000.00	NA NA	CONTRACTUAL	N N
		-nothing fol				12,000.00	191	SONTIONE	ojujša il.
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	Ent	Princes VIII	Take Times III	TATES TO		ini acii	m ·		
H-Majors			0.0	ontinue on separate sheet if					
SIGN	ATURE	L h	Interior		DATE			21/22 S FORM 212 (Revised 2)	E IP

IV. CIVIL SERVICE ELIGIBILITY

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOI								
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS	Office slaw	POSITION / NATURE OF WORK		
A								
		-				Telling Trans		
			-	-				
					e Shapeur	nd adapted and a comment		
	INAL HE CETT							
	100							
	Date from							
/II. LEARNING AND DEVELOPMENT (L&D,		ontinue on separat		(7)				
Start from the most recent L&D/training program and inclu				nief/Executive/Manag				
30. TITLE OF LEARNING AND DEVELOPMENT INT (Write in fu		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
	Dies value - Dien	From	То	A PART OF LAN				
APABILITY BUINDING IN MANAGING FOOD INNOV	ATION CENTERS TRAINING	27/09/2018	28/09/2018	16 hours	MANAGERIAL	Department of Trade and Industry & DOST		
OOD MANUFACTURING PRACTICES SEMINAR		03/04/2018	04/04/2018	16 hours	TECHNICAL	Department of Trade and Industry		
TRATEGIC PLANNING SEMINAR	er in the second	05/03/2018	06/03/2018	16 hours	TECHNICAL	Department of Trade and Industry		
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	ment Lesson at	B NE WILLIAM	Depter.	W -200	TOTAL PARTY	FIRST STRUM		
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/III. OTHER INFORMATION								
31. SPECIAL SKILLS and HOBBIES	32. A	ION-ACADEMIC DIS	TINCTIONS / RECO	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATIO (Write in full)		
Tellering					79.11	Landbank of the Philippines Employees		
Computer Literate (MS Word, Powerpoint,	no.					Association Society of Agricultural Educators in Regio		
Excel)					Inc. (SAER 8)			
Reading						Society of Agribusiness Students (SABS		
Art		A (1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1						
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		Continue on separat	te sheet if necessa					
SIGNATURE	Infon	itale/		D	ATE	12/21/22		

b. Have you been criminally charged before any court?	iployees)?	YES NO YES NO If YES, give details:		
b. Have you been criminally charged before any court? Have you ever been convicted of any crime or violation of any law,				
 Have you ever been convicted of any crime or violation of any law, 	35. a. Have you ever been found guilty of any administrative offense?			
	b. Have you been criminally charged before any court?			
	36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?			
7. Have you ever been separated from the service in any of the follow dropped from the rolls, dismissal, termination, end of term, finished in the public or private sector?		If YES, give details: finished contract		
a. Have you ever been a candidate in a national or local election he Barangay election)?	☐YES ☐NO 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 candid 	☐YES ✓NO If YES, give details:			
Have you acquired the status of an immigrant or permanent reside	☐YES ☑NO If YES, give details (country):			
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	YES VNO If YES, please specify: YES VNO If YES, please specify ID No: YES VNO If YES, please specify ID No:			
REFERENCES (Person not related by consanguinity or affinity to applicant /appor	intee)			
NAME	ADDRESS	TEL. NO.		
ANALITA A. SALABAO	Visca, Baybay City, Leyte	9235191103		
ARGINA M. POMIDA	Visca, Baybay City, Leyte	9777713855		
ANTONIO P. ABAMO	Visca, Baybay City, Leyte	9209835693		
I declare under oath that I have personally accomplished this complete statement pursuant to the provisions of pertinent la Philippines. I authorize the agency head/authorized representative agree that any misrepresentation made in this document administrative/criminal case/s against me.	ws, rules and regulations of the to verify/validate the contents state	Republic of the ed herein.		
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	.ln O	ANG		
Government Issued ID: PhilHealth ID	Myselfel			
D/License/Passport No.: 13-050183761-0	Signature (Sign inside the b	(XOX)		
Date/Place of Issuance: Baybay City, Leyte	12 21 22 Date Accomplished	Right Thumbmark		
SUBSCRIBED AND SWORN to before me this	, affiant exhibit	ing his/her validly issued government ID as indicated above.		