34			Commence of the Commence of th	
	Are you related by consanguinity or affinity to the appoint chief of bureau or office or to the person who has immed Bureau or Department where you will be appointed,	ting or recommending authority, or to the late supervision over you in the Office,		
	a. within the third degree?		D YES 2	I NO
	b. within the fourth degree (for Local Government Unit -	Career Employees/?		1 NO
	and the local angles for the designation of the	Janes Colympions)		
			If YES, give details	
36	a. Have you ever been found guilty of any administrative offense?			
-	a rare you are experienced going or any automosphere are use.			2 NO
			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 any law, decree, ordinance or regulation by		□ YES	☑ NO
	any court or tribunal?		If YES, give details:	
37	Have you ever been separated from the service in any o	I the following modes: resignation		
	retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased		☐ YES ☑ NO If YES, give details:	
	out (abolition) in the public or private sector?		n . co. gre ocume	
38.		election held within the last year (except	C) VEC	CL NO.
	Barangay election)?		☐ YES ☑ NO If YES, give details:	
	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 lo	cal candidate?	If YES, give details	☑ NO
			II 153, give ocusio	
39	Have you acquired the status of an immigrant or permanent resident of another country?		☐ YES ☑ NO	
			If YES, give details	(country):
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) I 7277); and (c) Solo Parents Welfare Act of 2000 (RA 897	Magna Carta for Disabled Persons (RA		
	Are you a member of any indigenous group?	2), prease answer the following nems:		
	Are you a member of any margenous group?		If YES, please specify:	☑ NO
b. 0.	Are you a person with disability?		YES	⊠ NO
			If YES, please specify	
			☐ YES	☑ NO
0.	Are you a solo parent?			
	Are you a solo parent?		If YES, please specify	ID No:
	REFERENCES (Person not related by contanguisty or officity to applic	art (appointed)	If YES, please specify	ID No.
		art (appointed)  ADDRESS	If YES, please specify	D No.
	REFERENCES (Person not related by consanguinity or affinity to applic			D No.
	REFERENCES (Person not related by consanguintly or affinity to applic  NAME	ADDRESS	TEL NO	D No.
	REFERENCES (Person not related by contangunity or affinity to applic  NAME  HON. TOMAS SERAFICA	ADDRESS ORMOC CITY LEYTE	TEL NO. 9173065689	D No.
41	REFERENCES (Person not related by contangunity or affinity to applic  NAME  HON. TOMAS SERAFICA  HON. SELERIO M. PIALOGO  FILOMENA VALLECERA	ADDRESS ORMOC CITY LEYTE BRGY CONCEPCION, ORMOC CITY ORMOC CITY LEYTE	TEL NO 9173065689 9192518609 9380044995	D No.
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