

37 a. Have you ever been formally charged?	DYES <input checked="" type="checkbox"/> NO If YES, give details: _____
b. Have you ever been guilty of any administrative offense?	DYES <input checked="" type="checkbox"/> NO If YES, give details: _____
38. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	DYES <input checked="" type="checkbox"/> NO If YES, give details: _____
39. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract, AWOL or phased out, in the public or private sector?	DYES <input checked="" type="checkbox"/> NO If YES, give details: _____
40. Have you ever been a candidate in a national or local election (except Barangay election)?	DYES <input checked="" type="checkbox"/> NO If YES, give details: _____
41. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:	_____
a. Are you a member of any indigenous group?	DYES <input checked="" type="checkbox"/> NO If YES, please specify: _____
b. Are you differently abled?	DYES <input checked="" type="checkbox"/> NO If YES, please specify: _____
c. Are you a solo parent?	DYES <input checked="" type="checkbox"/> NO If YES, please specify: _____

42. REFERENCES (Person not related by consanguinity or affinity to applicant / appointee)

NAME	ADDRESS	TEL. NO.	
Engr. Carlo B. Dagohoy	Talisay City, Cebu	0943255075	ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size)
Ms. Maria Teresa Franco	Lapu-Lapu City, Cebu	09258123526	
Ms. Jennifer Estrella	Cebu City, Cebu	09324182960	
43. 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 representative to verify / validate the contents stated herein. I trust that this information shall remain confidential.			Computer generated or xerox copy of picture is not acceptable

COMMUNITY TAX CERTIFICATE NO.	 SIGNATURE (Sign inside the box)	 RIGHT THUMBMARK
ISSUED AT		
ISSUED ON (mm/dd/yyyy)		
	DATE ACCOMPLISHED 01/11/18	