



Republic of the Philippines
SOCIAL SECURITY SYSTEM
PERSONAL RECORD/UNIFIED MULTI-PURPOSE ID
(UMID) CARD APPLICATION (E-1/E-6)

MO0913IW202207140480 Date/Time Generated: 14 July 2022 04:11:12 PM

SS NUMBER 06-4433425-5					
NAME					
(LAST NAME) SUSVILLA	(FIRST NAME) ANGELOU	(MIDDLE NAME) DADOL	(SUFFIX)		
FACTS OF BIRTH					
DATE OF BIRTH (MMDDYYYY) 11281999	PLACE OF BIRTH (CITY/MUNICIPALITY) CITY OF BOGO	(PROVINCE/STATE) CEBU	(COUNTRY) PHILIPPINES	SEX FEMALE	
FATHER'S NAME (LAST NAME) SUSVILLA	(FIRST NAME) RIO	(MIDDLE NAME) GELIG	(SUFFIX)		
MOTHER'S MAIDEN NAME (LAST NAME) DADOL	(FIRST NAME) MA. RIZA	(MIDDLE NAME) MENDEZ	(SUFFIX)		
DEMOGRAPHIC DATA					
HOME ADDRESS (RM./FLR./UNIT NO. & BLDG. NAME or HOUSE/LOT NO. & BLK NO.)			(STREET NAME)	(SUBDIVISION)	
(BARANGAY/DISTRICT/LOCALITY) SANTO NIÑO	(CITY/MUNICIPALITY) CITY OF BOGO	(PROVINCE) CEBU	POSTAL CODE 6010	COUNTRY CODE 0063	
CIVIL STATUS SINGLE	HEIGHT (IN CENTIMETERS) 151	WEIGHT (IN KILOGRAMS) 49	DISTINGUISHING FEATURE/S	NATIONALITY FILIPINO	RELIGION LIGHT OF FAITH
OTHER CARD APPLICANT DATA					
TELEPHONE NUMBER (AREA CODE + TEL. NO.)	MOBILE NUMBER (0945) 691-3346	EMAIL ADDRESS susvillaangelou6@gmail.com			
DEPENDENT(S)/BENEFICIARY/IES					
SPOUSE	(LAST NAME)	(FIRST NAME)	(MIDDLE NAME)	(SUFFIX)	DATE OF BIRTH (MMDDYYYY)
CHILDREN	(LAST NAME)	(FIRST NAME)	(MIDDLE NAME)	(SUFFIX)	DATE OF BIRTH (MMDDYYYY)
1					
2					
3					
4					
5					
OTHER BENEFICIARY/IES (if without spouse & child and parents are both deceased)					
	(LAST NAME)	(FIRST NAME)	(MIDDLE NAME)	(SUFFIX)	RELATIONSHIP
1					
2					
FOR SELF-EMPLOYED/OVERSEAS FILIPINO WORKER/NON-WORKING SPOUSE					
SELF-EMPLOYED (SE)		OVERSEAS FILIPINO WORKER (OFW)		NON-WORKING SPOUSE (NWS)	
Profession/Business		Foreign Address		SS No./Common Reference No. of Working Spouse	
Year Prof./Business Started				Monthly Income of Working Spouse (P)	
Monthly Earnings		Monthly Earnings			
		Are you applying for membership in the Flex-Fund Program?			
		<input type="checkbox"/> YES <input type="checkbox"/> NO			
PURPOSE OF APPLICATION					
PURPOSE FOR EMPLOYMENT		PROFESSION/BUSINESS		ESTIMATED MONTHLY SALARY	
UMID CARD APPLICATION WITH ATM OPTION					
<input type="checkbox"/> UMID CARD AS ATM CARD (BANK NAME)			(BANK BRANCH)		
CERTIFICATION, DATA PRIVACY CONSENT AND AUTHORIZATION					
<p>1. I certify that the information provided are true and correct.</p> <p>2. I hereby consent to:</p> <ul style="list-style-type: none"> the collection, data capture, storage, biometric matching and the retention of my personal data for the generation/updating of my CRN, card production and delivery, further processing and payment of my loans and SSS benefits; sharing of these data with SSS service providers to carry out the purposes stated above; and disposal of this application in the manner consistent with the Data Privacy Act. <p>3. I trust that all these data shall be kept confidential by SSS and its service providers and my bank.</p> <p>4. I further give my consent to SSS to share necessary data with my chosen bank for the generation of bank account number, crediting of loan and benefit proceeds to the account number and payment of said loan and benefit proceeds. For this purpose, I consent for the sharing of my bank account number with SSS.</p>					



MEMBER'S DATA FORM (MDF)

FOR Pag-IBIG Fund USE ONLY	
Pag-IBIG MID NUMBER	121302927968
REGISTRATION TRACKING NUMBER	922195195411

OCCUPATIONAL STATUS	UNEMPLOYED/NOT YET EMPLOYED
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MEMBERSHIP CATEGORY	
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PERSONAL DETAILS

NAME	LAST NAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME	NO MIDDLE NAME
MEMBER	SUSVILLA	ANGELOU		DADOL	<input type="checkbox"/>
FATHER	SUSVILLA	RIO		GELIG	<input type="checkbox"/>
MOTHER (Maiden Name)	DADOL	MA RIZA		MENDEZ	<input type="checkbox"/>
SPOUSE (if Married)					<input type="checkbox"/>
MEMBER'S NAME AS APPEARING IN THE BIRTH CERTIFICATE	SUSVILLA	ANGELOU		DADOL	<input type="checkbox"/>

DATE OF BIRTH	11/28/1999	MARITAL STATUS	Single/Unmarried	TAXPAYER IDENTIFICATION NUMBER (TIN)	
PLACE OF BIRTH	BOGO, CEBU	CITIZENSHIP	FILIPINO	SSS NUMBER	
SEX	HEIGHT(cm.)	WEIGHT(kg.)	PROMINENT DISTINGUISHING FACIAL FEATURES	GSIS NUMBER	
FEMALE	0 00	0 00		EMPLOYEE NUMBER	
COMMON REFERENCE NUMBER (CRN)		FREQUENCY OF MEMBERSHIP SAVINGS (MS) PAYMENT		For AFP/PNP Employee, Serial/Badge No.	
				For DepEd Employee, Division Code-Station Code	

ADDRESS AND CONTACT DETAILS

PERMANENT HOME ADDRESS	COUNTRY + AREA CODE + TELEPHONE NUMBER
Unit/Room No., Floor	Building Name
Lot No., Block No., Phase No.	House No. Street Name
Subdivision	Barangay
Municipality/City	STO. NINO
BOGO	Province/State/Country
ZIP Code	CEBU, PHILIPPINES
6010	Home
	Cell Phone
	+63 (0945) 6913346
	Business (Direct Line)
	Business (Trunk Line)
	Email Address

PRESENT HOME ADDRESS	Lot no., Block no., Phase No.
Unit/Room No., Floor	Building Name
House No.	Street Name
Municipality/City	Subdivision
BOGO	Barangay
	STO. NINO
	Province/State/Country
	CEBU, PHILIPPINES
	ZIP Code
	6010

PREFERRED MAILING ADDRESS	PERMANENT HOME ADDRESS
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Republic of the Philippines

PHILIPPINE HEALTH INSURANCE CORPORATION

8/F, Golden Peak Tower, Gorordo Ave., cor. Escario St., Cebu City 6000

Healthline (032) 233 7407 (032) 233 7523 (032) 233 3287 (fax) (032) 233 3281 (032) 233 7871 www.philhealth.gov.ph

18 July 2022

Member Name : **SUSVILLA , ANGELOU DADOL**
Member Address : **SANTO NINO, BOGO, CEBU 6010**

Member Category : **INFORMAL ECONOMY INFORMAL SECTOR**

We are glad that you are now registered with the National Health Insurance Program (NHIP), a program being administered by the Philippine Health Insurance Corporation (PhilHealth).

Your lifetime PhilHealth Identification Number (PIN) is : **1225-0719-4808**

In order for you or any member of your family be entitled to the benefits of the NHIP especially during hospitalization, you or with your employer, or local government or sponsor should have paid the required number of monthly contributions to the Program.

It is important that you always use your PIN in paying your contributions and when you or any member of your family avail of NHIP benefits during hospitalization.

We would like to give you and your family continued protection on health.

Respectfully,

MARJORIE A. CABRIETO
REGIONAL VICE PRESIDENT
PRO - VII Cebu City

This is a system generated document, signature is not required



iris-noreply Jul 20, 2022

to me ▾



Transaction ID: 20220720TRS5810277

20 July 2022

Dear *SUSVILLA, ANGELOU DADOL* :

This is to inform you that you have successfully REGISTERED as a EXECUTIVE ORDER NO. 98 - FILIPINO CITIZEN Taxpayer with TIN: 611-726-915-00000 through the Document Locator Number (DLN): .



Republic of the Philippines
Department of Justice
National Bureau of Investigation



31096954

This is to certify that the person whose name, picture, signature and thumbprint appearing below applied for NBI Clearance and the results is as follows

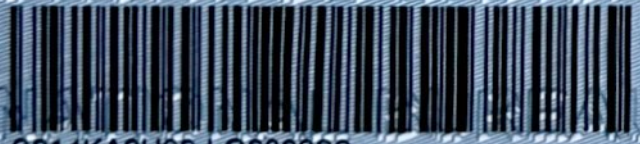
NBI ID NO. S214KA2U99-LO680929	VALID UNTIL January 08, 2025
FAMILY NAME SUSVILLA	FIRST NAME ANGELOU
MIDDLE NAME DADOL	HUSBAND'S SURNAME
ADDRESS PELAEZ STREET STO NINO BOGO CITY CEBU	
DATE OF BIRTH November 28, 1999	PLACE OF BIRTH BOGO
CITIZENSHIP FILIPINO	CIVIL STATUS SINGLE
PURPOSE MULTI-PURPOSE CLEARANCE	GENDER FEMALE



SIGNATURE
[Handwritten Signature]

PERSONAL COPY

REMARKS
NO RECORD ON FILE



S214KA2U99-LO680929

[Handwritten Signature]
ATTY. MEDARDO G. DE LEMOS
Director

Date Printed: Monday, 8 January 2024 12:44 pm
Agency LO DATID verallor
CASID verallor BIOID verallor
O.R. No. MP2VFPT927 RECID
O.R. Date 01/08/2024 12:40:52 p INTID
DST PAID PRTID laborj



Republic of the Philippines
Province of Cebu
CITY OF BOGO
BARANGAY STO. NIÑO



OFFICE OF THE PUNONG BARANGAY

Barangay Clearance

To Whom It May Concern:

This is to certify that **Ms. ANGELOU D. SUSVILLA** 24 yrs. old is a bonafide resident of Purok Hipolito Barangay Sto. Niño, City of Bogu, Cebu and is personally known to me as a person of good moral character and has no derogatory record filed in this office.

This certification is hereby issued upon the request of the above-named person in connection with her **EMPLOYMENT PURPOSES.**

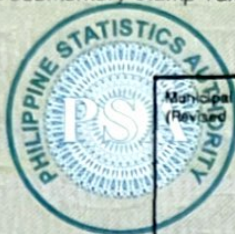
Given this **5th day of August, 2024** at Barangay Sto. Niño, City of Bogu, Cebu, Philippines.

RHEYWEN F. YGOT
Punong Barangay

Ms. Angelou D. Susvilla
Signature over Printed Name

Paid under: **O.R.1855228**
Amount: **P100.00**
Issued at: **Brgy. Sto. Niño**
On: **August 5, 2024**

NOT VALID WITHOUT SEAL



(Copy for OCRG)

Municipal Form No. 102 (Revised January 1993)		(To be accomplished in quadruplicate)		REMARKS/ANNOTATION	
Republic of the Philippines OFFICE OF THE CIVIL REGISTRAR GENERAL CERTIFICATE OF LIVE BIRTH (Fill out completely, accurately and legibly. Use ink or typewriter. Place X before the appropriate answer in Items 2, 5a, 5b and 19a.)					
Province <u>Cebu</u>			Registry No. <u>1077</u>		
City/Municipality <u>Bogo</u>			For OCRG USE ONLY: Population Reference No.		
CHILD BIRTH D	1. NAME (First) (Middle) (Last) <u>ANGELOU</u> <u>DADOL</u> <u>SUSVILLA</u>		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR		
	2. SEX ___ 1 Male <u>X</u> 2 Female		3. DATE OF BIRTH (day) (month) (year) <u>28</u> <u>Nov.</u> <u>1999</u>		41
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) House No., Street, Barangay) <u>SVMDE</u> <u>Bogo</u> <u>Cebu</u>		42		
	5a. TYPE OF BIRTH <u>X</u> 1 Single ___ 2 Twin ___ 3 Triplet, etc.		b. IF MULTIPLE BIRTH, CHILD WAS ___ 1 First ___ 2 Second ___ 3 Others, Specify		43
	c. BIRTH ORDER (live births and fetal deaths including this delivery) <u>1st</u> (first, second, third, etc.)		d. WEIGHT AT BIRTH <u>3,780</u> grams		44
MOTHER	6. MAIDEN NAME (First) (Middle) (Last) <u>Ma. Riza</u> <u>Mendez</u> <u>Dadol</u>		45		
	7. CITIZENSHIP <u>Fil.</u>		8. RELIGION <u>Light of Faith</u>		46
	9a. Total number of children born alive: <u>1</u>		b. No. of children still living including this birth: <u>1</u>		47
	10. OCCUPATION <u>Factory Worker</u>		11. Age at the time of this birth: <u>21</u> years		48
	12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Pelaez St.,</u> <u>Bogo</u> <u>Cebu</u>		49		
FATHER	13. NAME (First) (Middle) (Last) <u>Rio</u> <u>Gelig</u> <u>Susvilla</u>		50		
	14. CITIZENSHIP <u>Fil.</u>		15. RELIGION <u>Light of Faith</u>		51
	16. OCCUPATION <u>Goldsmith</u>		17. Age at the time of this birth: <u>26</u> years		52
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>Sept. 5, 1998 - Bogo, Cebu</u>					
19a. ATTENDANT ___ 1 Physician ___ 2 Nurse ___ 3 Midwife ___ 4 Hilot (Traditional Midwife) ___ 5 Others (Specify)					
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>3:12PM</u> o'clock am/pm on the date stated above.					
Signature <u>[Signature]</u> Address <u>SVMDE, Bogo, Cebu</u> Name in Print <u>EDUARDO MARY ANN Y. JABAT, M.D.</u> Title or Position <u>Medical Officer III</u> Date <u>11-28-99</u>					
20. INFORMANT Signature <u>[Signature]</u> Address <u>Pelaez St., Bogo, Cebu</u> Name in Print <u>RIO SUSVILLA</u> Relationship to the child <u>Father</u> Date <u>11-28-99</u>					
21. PREPARED BY Signature <u>[Signature]</u> Name in Print <u>LUCILA R. NASATAYA</u> Title or Position <u>Nursing Attendant</u> Date <u>11-28-99</u>			22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>[Signature]</u> Name in Print <u>RUDY L. PESCANTE</u> Title or Position <u>MUNICIPAL CIVIL REGISTRAR</u> Date <u>Dec 3, 1999</u>		

41	42	43	44
45	46	47	48
49	50	51	52
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CSM
 CLAIRE DENNIS S. MAPA, Ph. D.
 National Statistician and Civil Registrar General
 Philippine Statistics Authority





Cebu Normal University

Office of the University Registrar
Osmeña Blvd., Cebu City 6000, Philippines
Telefax: (032) 254-0067 E Mail: registrar@cnu.edu.ph
School Code: 0778

Member: Accrediting Agency of Chartered
Colleges & Universities of the Philippines
Inc. (AACUP).

OFFICIAL TRANSCRIPT OF RECORDS

Page : 1

PERSONAL DATA :

Name of Student : SUSVILLA, ANGELOU DADOL
ID/Student Number : 18-000946
Date of Birth : 11/28/1999
Birthplace : BOGO CITY, CEBU
Sex : FEMALE
Religion : SUGA SA TULU-HUAN
Citizenship : FILIPINO
Parent/Spouse : RIO G. SUSVILLA
Address : PELAEZ ST., STO. NIÑO, BOGO CITY, CEBU 6010
Tel. No., if any :
Guardian, if Supported by Non-Parent :
Address :
Tel. No. :



SUSVILLA, ANGELOU D.

PRELIMINARY EDUCATION :

Elementary : BOGO CENTRAL SCHOOL 2 Year Graduated : 2012
Secondary : CITY OF BOGO SCIENCE AND ARTS ACADEMY Year Graduated : 2016

GRADING SYSTEM - UNDERGRADUATE LEVEL

GRADE EQUIVALENTS				INDICATOR	GRADE EQUIVALENTS				INDICATOR	GRADE EQUIVALENTS				INDICATOR
95	1.0	5.0	A+	Excellent	85	2.0	4.0	B	Good	76	2.9	3.1	C	
94	1.1	4.9	A		84	2.1	3.9	B		75	3.0	3.0	C	
93	1.2	4.8	A		83	2.2	3.8	B		74	5.0	2.9	F	Failed
92	1.3	4.7	A		82	2.3	3.7	B-		NG	"No Grade"			
91	1.4	4.6	A-	Very Good	81	2.4	3.6	B-		NC	"No Credit"			
90	1.5	4.5	A-		80	2.5	3.5	B-		W	"Withdrawn"			
89	1.6	4.4	A-		79	2.6	3.4	C+	Fair					
88	1.7	4.3	B+		78	2.7	3.3	C+						
87	1.8	4.2	B+		77	2.8	3.2	C+						
86	1.9	4.1	B+											

GRADUATE LEVEL

1.0	Excellent	NG	"No Grade"
1.1 - 1.25	Very Good	NC	"No Credit"
1.26 - 1.50	Good	W	"Withdrawn"
1.51 - 1.75	Satisfactory		
1.76 - 2.0	Passing		
3.0	Failed		

One collegiate unit of credit is one hour lecture or recitation each week or a total of 18 hours in a semester. Three hours of laboratory work each week or a total of 54 hours a semester is also regarded as one unit of credit.

The semestral average grade of a student is computed by multiplying the grade earned by the corresponding unit/s assigned to a course and the product, as summarized, is divided by the total units earned for the semester.

NOTE : This transcript is original if it bears the embossed seal of the university and the ink signature of the Registrar.

NOT VALID WITHOUT
SEAL

OR No. 370437

Dated 08-05-2022

user : carcuevaj date issued : 08-16-2022 11:59:25am

JASON P. SABEQUIL, LPT
University Registrar III

DOC. STAMP PAID
Under the same OR No.
Amount Paid : P30.00



OFFICIAL TRANSCRIPT OF RECORDS

Student Name : SUSVILLA, ANGELOU DADOL

Subject Title & No	Description	Grade	Unit
Cebu Normal University, Cebu City			
<u>First Semester 2018-2019</u>			
BACHELOR OF PHYSICAL EDUCATION (BPE)			
BPEd 101	Philo-Anthropological Foundations of PE and Sports	2.00	3.0
BPEd 102	Anatomy and Physiology of Human Movement	1.40	5.0
Educ 1	The Child and Adolescent Learner and Learning Principles	1.60	3.0
GE 1	Logic	2.00	3.0
GE 2	Understanding the Self	1.50	3.0
NSTP 1	National Service Training Program	1.30	3.0
PE 1	Physical Education 1	1.10	2.0

Second Semester 2018-2019

BACHELOR OF PHYSICAL EDUCATION (BPE)			
BPEd 103	Physiology of Exercise and Physical Activity	1.70	3.0
BPEd 104	Principles of Motor Control and Learning of Exercise, Sports and Dance	1.10	3.0
BPEd 105	Sports and Exercise Psychology	1.40	3.0
BPEd 106	Movement Education	1.70	3.0
Educ 2	Foundation of Special and Inclusive Education	2.30	3.0
Educ 3	Building and Enhancing New Literacies across the Curriculum	1.90	3.0
GE 3	Mathematics in the Modern World	2.30	3.0
NSTP 2	National Service Training Program	1.20	3.0
PE 2	Physical Education 2	1.00	2.0

First Semester 2019-2020

BACHELOR OF PHYSICAL EDUCATION (BPE)			
BPEd 107	Philippine Traditional Dances	1.50	3.0
BPEd 108	Individual/Dual/Combative Sports	1.60	3.0
BPEd 109	Personal, Community and Environmental Health	1.60	3.0
BPEd 110	International Dance and Its Forms	1.30	3.0
Educ 4	Technology for Teaching and Learning	1.50	3.0
Educ 5	The Teaching Profession	1.50	3.0
GE 4	Ethics	1.70	3.0
Lit 1	Literatures of the Philippines	1.80	3.0
PE 3	Physical Education 3	1.20	2.0

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JASON P. SAREQUIL, LPT
University Registrar III



Cebu Normal University

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OFFICIAL TRANSCRIPT OF RECORDS

Page : 3

Student Name : SUSVILLA, ANGELOU DADOL

Subject Title & No	Description	Grade	Unit
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Cebu Normal University, Cebu City

Second Semester 2019-2020

BACHELOR OF PHYSICAL EDUCATION (BPE)

BPEd 111	Philippine Traditional Games	1.10	3.0
BPEd 112	Team Sports	1.60	3.0
BPEd 113	Drug Education, Consumer Health Education and Healthy Eating	1.30	3.0
BPEd 114	Curriculum and Assessment for PE and Health Education	1.30	3.0
Educ 6	Facilitating Learner-Centered Teaching	1.40	3.0
GE 5	Purposive Communication	1.40	3.0
GE 6	Wikang Filipino	1.50	3.0
Lit 2	Literatures of the World	1.60	3.0
PE 4	Physical Education 4	1.10	2.0

First Semester 2020-2021

BACHELOR OF PHYSICAL EDUCATION (BPE)

BPEd 116	Research in PE & Health 1	1.30	3.0
BPEd 117	Process of Teaching PE and Health	1.50	3.0
BPEd 118	Coordinated School Health Program	1.40	3.0
BPEd 124	Elective 1*	1.30	3.0
Educ 10	The Teacher and the School Curriculum	1.40	3.0
Educ 7	Educational Research	1.40	3.0
Educ 8	Assessment in Learning 1	1.40	3.0
Educ 9	Field Study 1	1.60	3.0
GE 13	Masing na Pagpapahayag	2.00	3.0

Second Semester 2020-2021

BACHELOR OF PHYSICAL EDUCATION (BPE)

BPEd 119	Technology Application in PE and Health Education	1.60	3.0
BPEd 120	Emergency Preparedness and Safety Management	1.20	3.0
BPEd 121	Applied Motor Control and Learning of Exercise, Sports and Dance	1.20	3.0
BPEd 122	Adapted Physical Education	1.40	3.0
BPEd 123	Research in PE and Health 2	1.40	3.0
BPEd 125	Elective 2*	1.60	3.0
Educ 11	Assessment of Learning 2	1.60	3.0
Educ 12	Field Study 2	1.00	3.0
Educ 13	The Teacher and the Community, School Culture and Organizational Leadership	1.10	3.0

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OR No. 370437

Dated 08-05-2022

user : carcuevaj date issued : 08-16-2022 11:59:25am

JASON P. SAREQUIL, LPT
University Registrar III



Republic of the Philippines

**PROFESSIONAL REGULATION COMMISSION
PROFESSIONAL IDENTIFICATION CARD**



LAST NAME ▶ SUSVILLA
 FIRST NAME ▶ ANGELOU
 MIDDLE NAME ▶ DADOL
 REGISTRATION NO. ▶ 2069265
 REGISTRATION DATE ▶ 07/13/2023
 VALID UNTIL ▶ 11/28/2026

PROFESSIONAL TEACHER



23

Professional Regulation Commission
www.prc.gov.ph

CERTIFICATION

23-6017122

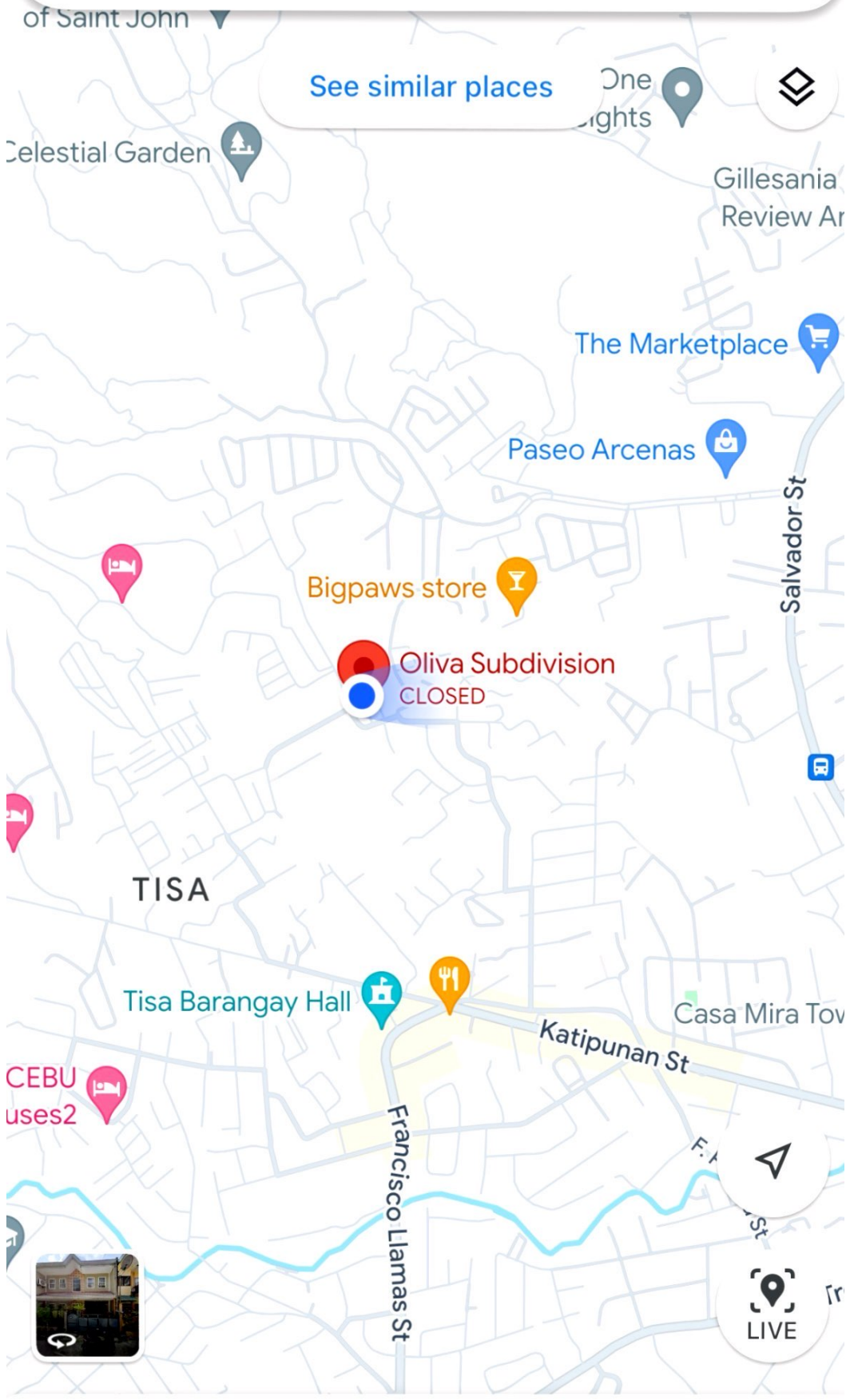
This is to certify that the person whose name, photograph, and signature appear herein is a duly registered professional, legally authorized to practice his/her profession with all the rights and privileges appurtenant thereto.

This is to certify further that he/she is a professional in good standing and that his/her certificate of registration/professional license has not been suspended, revoked or withdrawn.

Signature of Professional


CHARITO A. ZAMORA
Chairperson

oliva subdivision tisa



Oliva Subdivision

- Directions
- Start
- Directory
-





**FELIPE R. VERALLO
MEMORIAL FOUNDATION, INC.**
Clotilde Hills, Dakit, Bogo City, Cebu, Philippines 6010
info@frvcollege.com • marketing@frvcollege.com • BasicEd@frvcollege.com
frvcollege.com (032) 434-8210

CERTIFICATE OF EMPLOYMENT

To whom it may concern:

This is to certify that **ANGELOU D. SUSVILLA** is a bona fide educator of this institution Felipe R. Verallo Memorial Foundation Inc. as Junior and Senior High School Teacher from June 13, 2022 up to present.

This is to certify further that she has followed the rules and regulations in this institution.

This certification is issued upon the request of **Angelou D. Susvilla** for any legal purposes that may serve him best.

Given this 23rd day of March 2023 here in Dakit, Bogo City.

Prepared by:

AMALIA L. YPIL
HR Director

Checked by:

TADEO A. BARANGGAN
Basic Education, Principal

Noted by:

PERFECTO P. PRIAS JR.
School Administrator

Not Valid
Without Seal

