

37 a. Have you ever been formally charged? YES NO
If YES, give details _____

b. Have you ever been guilty of any administrative offense? YES 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? YES NO
If YES, give details _____

39. Have you ever been separated from the service in any 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? YES NO
If YES, give details _____

40. Have you ever been a candidate in a national or local election (except Barangay election)? YES NO
If YES, give details _____

41. Pursuant to: (a) Indigenouse People's Act (RA 83710); (b) Magna Carta for Disabled Persons (RA 7277); and Solo Parents Welfare Act 2000 (RA 8972), please answer the following items:

a. Are you a member of any indigenous group? YES NO
If YES, give please specify: _____

b. Are differently abled? YES NO
If YES, give please specify: _____

c. Are you a solo parent? YES NO
If YES, give please specify: _____

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

NAME	ADDRESS	TEL NO.
DOMINIC CANIZALES	LAPU-LAPU CITY, CEBU	09151420680
STEPHANY GRACE - YU	CAPITOL, ESCALDO, CEBU CITY	09420046645

43. EMPLOYMENT RECORD (latest)

COMPANY NAME	POSITION	FROM	TO
GRAVITY BPO	QUALITY ASSURANCE	MARCH 14, 2019	JULY 15, 2019

44. 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.

ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size)

Computer generated or xerox copy of picture is not acceptable

COMMUNITY TAX CERTIFICATE NO.	RIGHT THUMBMARK
ISSUED AT	
ISSUED ON (mm/dd/yyyy)	

IN CASE OF EMERGENCY:
Please Contact: RICHE EYES
(mobile) 0916602407

SIGNATURE (Sign in the box)