

37 a. Have you ever been formally charged?	DYES <input type="checkbox"/> DNO If YES, give details _____						
b. Have you ever been guilty of any administrative offense?	DYES <input type="checkbox"/> DNO 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 type="checkbox"/> DNO 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?	DYES <input type="checkbox"/> DNO If YES, give details _____						
40. Have you ever been a candidate in a national or local election (except Barangay election)?	DYES <input type="checkbox"/> DNO 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?	DYES <input type="checkbox"/> DNO If YES, give please specify: _____						
b. Are differently abled?	DYES <input type="checkbox"/> DNO If YES, give please specify: _____						
c. Are you a solo parent?	DYES <input type="checkbox"/> DNO If YES, give please specify: _____						
42. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)							
NAME	ADDRESS	TEL NO.					
43. EMPLOYMENT RECORD (latest)							
COMPANY NAME	POSITION	FROM	TO				
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.			ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size)				
I also authorize the agency head/ authorized representative to verify/ validate the contents stated herein. I trust that this information shall remain confidential.							
<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="text-align:center;">COMMUNITY TAX CERTIFICATE NO.</td></tr> <tr><td style="text-align:center;">ISSUED AT</td></tr> <tr><td style="text-align:center;">/ /</td></tr> <tr><td style="text-align:center;">ISSUED ON (mm/dd/yyyy)</td></tr> </table>	COMMUNITY TAX CERTIFICATE NO.	ISSUED AT	/ /	ISSUED ON (mm/dd/yyyy)	RIGHT THUMBMARK	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div> <p style="font-size: small; margin-top: 5px;">Computer generated or xerox copy of picture is not acceptable</p>	
COMMUNITY TAX CERTIFICATE NO.							
ISSUED AT							
/ /							
ISSUED ON (mm/dd/yyyy)							
IN CASE OF EMERGENCY: Please Contact: <u>MARIA EUPHACIA ANONA</u> Contact Number: _____ Relation: _____		<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="text-align:center;">SIGNATURE (Sign in the box)</td></tr> <tr><td style="text-align:center;">DATE ACCOMPLISHED</td></tr> </table>		SIGNATURE (Sign in the box)	DATE ACCOMPLISHED		
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