

37 a. Have you ever been formally charged?	DYES <input type="checkbox"/> NO If YES, give details _____
b. Have you ever been guilty of any administrative offense?	DYES <input 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 type="checkbox"/> 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?	DYES <input 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 type="checkbox"/> 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?	DYES <input type="checkbox"/> NO If YES, give please specify: _____
b. Are differently abled?	DYES <input type="checkbox"/> NO If YES, give please specify: _____
c. Are you a solo parent?	DYES <input type="checkbox"/> NO 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
QUALFON PHILIPPINES,	CSR	APRIL 5, 2016	FEBRUARY 15, 2020

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.



COMMUNITY TAX CERTIFICATE NO.	RIGHT THUMBMARK
ISSUED AT	
07 / 08 /2020	
ISSUED ON (mm/dd/yyyy)	

IN CASE OF EMERGENCY: Please Contact: <u>ALMA VILLAGONZALO</u> Contact Number: <u>0928 708 5578</u> Relation: <u>MOTHER</u>	 SIGNATURE (Sign in the box) _____ DATE ACCOMPLISHED _____
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