

1. PERSONAL INFORMATION

2. SURNAME

3. DATE OF BIRTH (m/mdd/yyyy)

4. PLACE OF BIRTH

5. SEX

6. CIVIL STATUS

7. HEIGHT (m)

8. WEIGHT (kg)

9. BLOOD TYPE

10. GSIS ID NO.

11. PAG-BIG ID NO.

12. PHILHEALTH NO.

13. SSS NO.

14. TIN NO.

15. AGENCY EMPLOYEE NO.

16. CITIZENSHIP

17. RESIDENTIAL ADDRESS

18. PERMANENT ADDRESS

19. TELEPHONE NO.

20. MOBILE NO.

21. E-MAIL ADDRESS (if any)

22. SPOUSE'S SURNAME

23. NAME OF CHILDREN (Write full name and list all)

24. FATHER'S SURNAME

25. MOTHER'S MAIDEN NAME

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23. NAME OF CHILDREN (Write full name and list all)

24. FATHER'S SURNAME

25. MOTHER'S MAIDEN NAME

26. LEVEL

27. NAME OF SCHOOL

28. BASIC EDUCATION/DEGREE/COURSE

29. PERIOD OF ATTENDANCE

30. HIGHEST LEVEL UNITS EARNED (if not graduated)

31. YEAR GRADUATED

32. SCHOLARSHIP/ACADEMIC HONORS RECEIVED

33. SECONDARY

34. SECONDARY

35. VOCATIONAL / TRADE COURSE

36. COLLEGE

37. GRADUATE STUDIES

38. SIGNATURE

39. DATE

40. CS ID No.

SIGNATURE		DATE	
SINGING COOKING DOCUMENT FILING/SORTING TYPING		32.	
		33.	
		31.	
		30.	
		29.	

VIII. OTHER INFORMATION

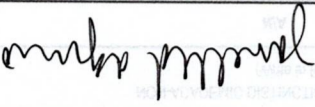
[illegible][illegible]


ATTY. ZAYRRA BENJIC L. MALTO
NOTARY PUBLIC Until December 31, 2024
For the Province of Cagayan, Philippines
PTR No. CGY1633589-01/03/2024, Sanchez Mira
IBP O.R. No. 324862/12/03/2023, Cagayan
MCLE Compliance Exempt (Admitted to the bar
last May 2, 2023)

Doc. No. 355
Page No. 52
Book No. 11
Series of 20 34

SUBSCRIBED AND SWORN to before me this 01 FEB 2024, affiant exhibiting his/her validly issued government ID as indicated above.

Date/Place of Issuance:	SANCHEZ MIRA, CAGAYAN
ID/License/Passport No.:	2019-5491-3750-8263
Government Issued ID:	PHILIPPINE IDENTIFICATION CARD
PLEASE INDICATE ID Number and Date of Issuance	
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)	

Date Accomplished	
Signature (Sign inside the box)	

Right Thumbmark	
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42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal cases/s against me.

NAME	DR. FREDDIE P. MASULI
ADDRESS	SANCHEZ MIRA, CAGAYAN
TEL. NO.	SANCHEZ MIRA, CAGAYAN

PHOTO

ID picture taken within the last 6 months (passport size)

Computer generated or photocopied picture is not acceptable

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

a. Are you a member of any indigenous group?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
b. Are you a person with disability?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
c. Are you a solo parent?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

40. 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:

39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
37. 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 or phased out (abolition) in the public or private sector?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
35. a. Have you ever been found guilty of any administrative offense?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed,

a. within the third degree?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
b. within the fourth degree (for Local Government Unit - Career Employees)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

If YES, give details:

Status of Case/s:

Date Filed:

If YES, give details:

If YES, give details: