

CS Form No. 33-A
Revised 2018



Republic of the Philippines
Province of Batangas
MUNICIPALITY OF MATAASNAKAHOY



Mr. JEFFREY C. ATIENZA

You are hereby appointed as Administrative Aide I (Utility Worker I) SG-1 under
(Position Title)

Permanent status at the Office of the Municipal Assessor with a compensation rate of Nine Thousand
(Permanent, Temporary, etc.) (Office/Department/Unit)

Three Hundred Eighty Eight Pesos (P 9,388.00) per month.

The nature of this appointment is Original vice Newly Created
(Original, Promotion, etc.)

who was Vacant with Plantilla Item No. 77.
(Transferred, Retired, etc.)

This appointment shall take effect on the date of signing by the appointing authority.

Very truly yours,

JANET MAGPANTAY ILAGAN
Municipal Mayor
September 16, 2022
Date of Signing

CSC ACTION: APPROVED

DRY STAMP

LILY BETH L. MAJOMOT
Director II

Authorized Official

Date

SEP 28 2022

OCT 04 2022
(Stamp of Date Release)
2-15

Certification

This is to certify that all requirements and supporting papers pursuant to CSC MC No. 24, s. 2017, as amended, have been complied with, reviewed and found to be in order.

The position was published at CSC Job Portal from August 24, 2022 to September 8, 2022 and posted in CSC-FO Batangas , Public Market, Office Lobby from August 24, 2022 to September 8, 2022 in consonance with RA No. 7041. The assessment by the Human Resource Merit Promotion and Selection Board (HRMPSB) started on September 9, 2022.

 GALLY D. TIPAN
OIC- Mun. Human Resource Management Officer

Certification

This is to certify that the appointee has been screened and found qualified by the majority of the HRMPSB/Placement Committee during the deliberation held on September 13, 2022.

~~JANET MAGPANTAY LAGAN~~
Municipal Mayor

CSC Notation

ANY ERASURE OR ALTERATION ON THE CSC ACTION SHALL NULLIFY OR INVALIDATE THIS APPOINTMENT EXCEPT IF THE ALTERATION WAS AUTHORIZED BY THE COMMISSION.

Original Copy - for the Appointee Original Copy - for the Civil Service Commission Original Copy - for the Agency	<p>Acknowledgement</p> <p><i>Received original/photocopy of appointment on September 16, 2022</i></p>  <p>JEFFREY C. ATIENZA Appointee</p>
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Revised 2018



Republic of the Philippines
Province of Batangas
MUNICIPALITY OF MATAASNAKAHOY

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Very truly yours,

JANET MAGPANTAY ILAGAN
Municipal Mayor

September 16, 2022
Date of Signing

CSC ACTION:

DIR. RELEASE

Authorized Official
Date

(Stamp of Date Release)

Certification

This is to certify that all requirements and supporting papers pursuant to CSC MC No. 24, s. 2017, as amended, have been complied with, reviewed and found to be in order.

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 **GALLY D. TIPAN**
OIC- Mun. Human Resource Management Officer

Certification

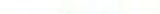
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JANET MAGPANTAY ILAGAN
Municipal Mayor

CSC Notation

1	2	3	4	5	6	7	8	9	10
11	12	13	14	15	16	17	18	19	20
21	22	23	24	25	26	27	28	29	30
31	32	33	34	35	36	37	38	39	40
41	42	43	44	45	46	47	48	49	50
51	52	53	54	55	56	57	58	59	60
61	62	63	64	65	66	67	68	69	70
71	72	73	74	75	76	77	78	79	80
81	82	83	84	85	86	87	88	89	90
91	92	93	94	95	96	97	98	99	100

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Original Copy - for the Appointee Original Copy - for the Civil Service Commission Original Copy - for the Agency	Acknowledgement <i>Received original/photocopy of appointment on September 16, 2022</i>  JEFREY C. ATIENZA Appointee
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PERSONAL DATA SHEET

WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned.

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

Print legibly. Tick appropriate boxes () and use separate sheet if necessary. Indicate N/A if not applicable. **DO NOT ABBREVIATE.**

1. GS ID No.

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	ATIENZA			
FIRST NAME	JEFFREY			
MIDDLE NAME	CUARTO			
3. DATE OF BIRTH (mm/dd/yyyy)	MAY 18, 1990	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:	
4. PLACE OF BIRTH	MATAASNAKAHOY, BATANGAS			
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female			
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	63 LOBRIN House/Block/Lot No. Street	
7. HEIGHT (m)	1.7018 METERS		PUROK IV UPA Subdivision/Village Barangay	
8. WEIGHT (kg)	73 KG	ZIP CODE	MATAASNAKAHOY BATANGAS City/Municipality Province	
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	63 LOBRIN House/Block/Lot No. Street	
10. GSIS ID NO.	N/A		PUROK IV UPA Subdivision/Village Barangay	
11. PAG-IBIG ID NO.	121306638677		MATAASNAKAHOY BATANGAS City/Municipality Province	
12. PHILHEALTH NO.	09-201139986-1		ZIP CODE	4223
13. SSS NO.	0423984567		19. TELEPHONE NO.	043-786-3590
14. TIN NO.	411-511-289-001	20. MOBILE NO.	0910-855-8507	
15. AGENCY EMPLOYEE NO.	ASS007	21. E-MAIL ADDRESS (if any)	jeffreyatienzac@gmail.com	

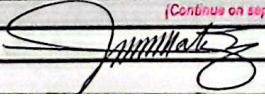
II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR.)	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	ATIENZA			
FIRST NAME	OSCAR	NAME EXTENSION (JR., SR.)	N/A	
MIDDLE NAME	MALABANAN			
25. MOTHER'S MAIDEN NAME				
SURNAME	CUARTO			
FIRST NAME	JOSEPHINE			
MIDDLE NAME	ENCARNACION			
(Continue on separate sheet if necessary)				

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/UNITS EARNED (if not)	YEAR GRADUATED	SCHOLARSHIP/Academic Honors Received
			From	To			
ELEMENTARY	PAARALANG SENTRAL NG MATAASNAKAHOY	ELEMENTARY	1997	2003	N/A	2003	N/A
SECONDARY	BAYBOROB NATIONAL HIGH SCHOOL	SECONDARY	2003	2007	N/A	2007	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	KOLEHIYO NG LUNGSOD NG LIPA	BACHELOR OF SCIENCE IN COMPUTER SCIENCE	2007	2011	N/A	2011	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	JANUARY 10, 2023	CS FORM 212 (Revised 2017), Page 1 of 4
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IV. CIVIL SERVICE ELIGIBILITY

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

Include private employment. Start from your recent work! Description of duties should be indicated in the attached Work Experience sheet.

(Continue on separate sheet if necessary)

SIGNATURE

DATE

JANUARY 10, 2023

CS FORM 212 (Revised 2017) Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE'S / VOLUNTARY ORGANIZATIONS

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

(Continue on separate sheet if necessary)

VII. OTHER INFORMATION

(Continued on next page)

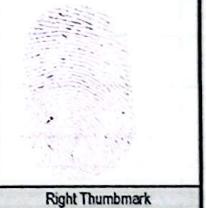
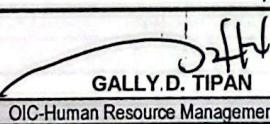
SIGNATURE

J. P. Jones

DATE

(as necessary)

— 1 —

<p>34. Are you related by consanguinity or affinity, to the appointing or chief of bureau or office or to the person who has immediate Bureau or Department where you will be appointed,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____ N/A</p>												
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ N/A</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ N/A Date Filed: _____ Status of Case/s: _____</p>												
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ N/A</p>												
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ N/A</p>												
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? 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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ N/A</p>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details (country): _____ N/A</p>												
<p>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:</p> <p>a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____</p>												
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)</p>	<table border="1"> <thead> <tr> <th>NAME</th> <th>ADDRESS</th> <th>TEL NO.</th> </tr> </thead> <tbody> <tr> <td>FELICIANA O. GONZALES</td> <td>M-KAHAY, BATANGAS</td> <td>0917-766-8077</td> </tr> <tr> <td>JORDAN LESCANO</td> <td>M-KAHAY, BATANGAS</td> <td>0908-239-6790</td> </tr> <tr> <td>ROY A. MANALO</td> <td>M-KAHAY, BATANGAS</td> <td>0927-232-2274</td> </tr> </tbody> </table>	NAME	ADDRESS	TEL NO.	FELICIANA O. GONZALES	M-KAHAY, BATANGAS	0917-766-8077	JORDAN LESCANO	M-KAHAY, BATANGAS	0908-239-6790	ROY A. MANALO	M-KAHAY, BATANGAS	0927-232-2274
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JORDAN LESCANO	M-KAHAY, BATANGAS	0908-239-6790											
ROY A. MANALO	M-KAHAY, BATANGAS	0927-232-2274											
<p>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 case/s against me.</p>													
<p>Government Issued ID (e.g. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: TIN I.D. ID/License/Passport No.: 411-511-289-000 Date/Place of Issuance: JUNE 15, 2017</p>	<p> Signature (Sign inside the box) JANUARY 10, 2023 Date Accomplished</p>	<p> Right Thumbmark</p>											
<p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <p> GALLY D. TIPAN OIC-Human Resource Management Officer</p> <p>CS FORM 212 (Revised 2017), Page 4 of 4</p>													



Republic of the Philippines
Province of Batangas
MUNICIPALITY OF MATAASNAKAHOY

C E R T I F I C A T I O N

TO WHOM IT MAY CONCERN:

This is to certify that in connection with the appointment of Mr. JEFFREY C. ATIENZA as Administrative Aide I (Utility Worker I) in the Office of the Municipal Assessor of this municipality, all pertinent requirements contained in RA 7160 in Section 325 on limitation of personal services in the total annual/supplemental appropriation, salary rate, etc., have been complied with.

JANET MAGPANTAY ILAGAN
Municipal Mayor



Republic of the Philippines
Province of Batangas
MUNICIPALITY OF MATAASNAKAHOY

OFFICE OF THE MUNICIPAL ACCOUNTANT

C E R T I F I C A T I O N

THIS IS TO CERTIFY that funds are available for the position of Administrative
Aide I (Utility Worker I) in the Office of the Municipal Assessor of this municipality, with Salary
Grade 1 amounting to ONE HUNDRED TWELVE THOUSAND SIX HUNDRED FIFTY SIX
PESOS (P 112,656.00) per annum as per Annual Budget CY-2022 of this municipality.

Issued this 16th day of September , 2022 at Mataasnakahoy, Batangas.


LENILYN C. CARAAN
Municipal Accountant

Republic of the Philippines
POSITION DESCRIPTION FORM
DBM-CSC Form No. 1
(Revised Version No. 1, s. 2018)

1. POSITION TITLE (as approved by authorized agency) with
parenthetical title

Administrative Aide I
(Utility Worker I)

2. ITEM NUMBER

3. SALARY GRADE

77

1

4. FOR LOCAL GOVERNMENT POSITION, ENUMERATE GOVERNMENTAL UNIT AND CLASS

Province
 City
 Municipality

1st Class
 2nd Class
 3rd Class
 4th Class

5th Class
 6th Class
 Special

5. DEPARTMENT, CORPORATION OR AGENCY/
LOCAL GOVERNMENT

6. BUREAU OR OFFICE

Local Government Unit of Mataasnakahoy, Batangas

Office of the Municipal Assessor

7. DEPARTMENT / BRANCH / DIVISION

8. WORKSTATION / PLACE OF WORK

Office of the Municipal Assessor

Office of the Municipal Assessor

9. PRESENT APPROP
ACT

SB Resolution No.
084-S-2022/
Ordinance of Budget
No. 05-S-2022

10. PREVIOUS APPROP ACT

N/A

11. SALARY AUTHORIZED

P 9,388.00

PERA	2,000.00
Clothing Allow.	6,000.00
Cash Gift	5,000.00
Year End Bonus	9,388.00
Mid-year Bonus	9,388.00
PEI	5,000.00

13. POSITION TITLE OF IMMEDIATE SUPERVISOR

14. POSITION TITLE OF NEXT HIGHER SUPERVISOR

Municipal Assessor

N/A

15. POSITION TITLE, AND ITEM OF THOSE DIRECTLY SUPERVISED

(if more than seven (7) list only by their item numbers and titles)

POSITION TITLE

ITEM NUMBER

N/A

N/A

16. MACHINE, EQUIPMENT, TOOLS, ETC., USED REGULARLY IN PERFORMANCE OF WORK

Broom, Dustpan, Telephone, Computer, Logbook

17. CONTACTS / CLIENTS / STAKEHOLDERS

17a. Internal	Occasional	Frequent	17b. External	Occasional	Frequent
---------------	------------	----------	---------------	------------	----------

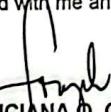
Executive / Managerial	<input type="checkbox"/>	<input type="checkbox"/>	General Public	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Supervisors	<input type="checkbox"/>	<input type="checkbox"/>	Other Agencies	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Non-Supervisors	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Others (Please Specify):		
Staff	<input type="checkbox"/>	<input type="checkbox"/>			

18. WORKING CONDITION

Office Work	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other/s (Please Specify)
Field Work	<input type="checkbox"/>	<input type="checkbox"/>	

19. BRIEF DESCRIPTION OF THE GENERAL FUNCTION OF THE UNIT OR SECTION

Takes charge in the assessment of real property. Ensure that all laws and policies governing the appraisal and assessment of real properties and property executed equitably and justifiably.

21. QUALIFICATION STANDARDS			
21a. Education	21b. Experience	21c. Training	21d. Eligibility
Must be able to read and write	None Required	None Required	None Required (MC 11, s. 96-Cat III)
21e. Core Competencies			Competency Level
None Yet			None Yet
21f. Leadership Competencies			Competency Level
None Yet			None Yet
22. STATEMENT OF DUTIES AND RESPONSIBILITIES (Technical Competencies)			
Percentage of Working Time 20% 10% 10% 20% 10% 10% 10% 10%	(State the duties and responsibilities here:)		
	Maintain the cleanliness and orderliness in the office		
	Arrange various decorations in the office		
	Answering telephone calls		
	Assist the Municipal Assessor for Assessment of buildings at diff. Brgys.		
	Assist in Tax Mapping		
	Assist in Reclassifying of lots from Agriculture to Residential/ Commercial		
	Filing of Monthly Report, Incoming and Outgoing communications		
	Perform other functions and duties that may be assigned from time to time.		
23. ACKNOWLEDGMENT AND ACCEPTANCE:			
<p>I have received a copy of this position description. It has been discussed with me and I have freely chosen to comply with the performance and behavior/conduct expectations contained herein.</p>  <p><u>JEFFREY C. ATIENZA</u> 9/16/22 Employee's Name, Date and Signature</p>  <p><u>FELICIANA D. GONZALES</u> 9/16/22 Municipal Assessor, Date and Signature</p>			



Republic of the Philippines
Province of Batangas
Municipality of Mataasnakahoy

OATH OF OFFICE

I, JEFFREY C. ATIENZA of Brgy. Upa, Mataasnakahoy, Batangas having been appointed to the position of Administrative Aide I (Utility Worker I), hereby solemnly swear, that I will faithfully discharge to the best of my ability, the duties of my present position and of all others that I may hereafter hold under the Republic of the Philippines; that I will bear true faith and allegiance to the same; that I will obey the laws, legal orders, and decrees promulgated by the duly constituted authorities of the Republic of the Philippines; and that I impose this obligation upon myself voluntarily, without mental reservation or purpose of evasion.

SO HELP ME GOD.

A handwritten signature in black ink, appearing to read "Jeffrey C. Atienza".

JEFFREY C. ATIENZA

(Signature over Printed Name of the Appointee)

Government ID: TIN
ID Number : 411-511-289-000
Date Issued : 06/15/2017

Subscribed and sworn to before me this 16th day of September, 2022 in Mataasnakahoy Batangas, Philippines.

A handwritten signature in black ink, appearing to read "Janet Magpantay Ilagan".

JANET MAGPANTAY ILAGAN

Municipal Mayor



CS Form No. 4
Revised 2018

Republic of the Philippines
Province of Batangas
MUNICIPALITY OF MATAASNAKAHOY

CERTIFICATION OF ASSUMPTION TO DUTY

This is to certify that Mr. JEFFREY C. ATIENZA has assumed the duties and responsibilities as Administrative Aide I (Utility Worker I) in the Office of the Municipal Assessor effective September 16, 2022.

This certification is issued in connection with the issuance of the appointment of Mr. Atienza as Administrative Aide I (Utility Worker I).

Done this 16th day of September , 2022 in Mataasnakahoy, Batangas.



JANET MAGPANTAY ILAGAN
Municipal Mayor

Date: September 16, 2022

Attested by:



GALLY D. TIPAN
OIC- Mun. Human Res. Mgt. Officer

201 file
Admin
COA
CSC



KOLEHIYO NG LUNGSOD NG LIPA

(Formerly Lipa City Public College)

Marawoy-Dagatan, Lipa City

OFFICE OF THE REGISTRAR OFFICIAL TRANSCRIPT OF RECORDS

Name **ATIENZA, JEFFREY C.**
Date of Birth May 18, 1990
Place of Birth M. Kahoy, Batangas
Parent/Guardian Oscar Atienza
Address Upa, M. Kahoy, Batangas
Curriculum Arts and Sciences

Sex: Male

ENTRANCE DATA:

Basis of Admission F-138 Date Admitted 2007
High School/College Bayorbor National High School
Address M. Kahoy, Batangas

RECORD OF GRADUATION		
Degree/Title	BACHELOR OF SCIENCE IN COMPUTER SCIENCE	
Major		
Date of Graduation	April 15, 2011	
Honors/Distinction		
Minimum number of units required for Graduation		
PRELIMINARY EDUCATION		
ELEMENTARY	M. Kahoy Central School	2003
SECONDARY	Bayorbor National High School	2007

COLLEGiate Record

Course Number	Descriptive Title of the Course	Grades		Credits
		Final	Re-Exam	
FIRST SEMESTER 2007 - 2008				
GE 101	Communication Arts 1	1.50		3
GE 201	College Algebra	2.00		3
CS 101	Computer Science Fundamentals	2.50		3
CS 111	Computer Programming 1	2.50		3
GE 301	Philippine History	2.00		3
GE 121	Logic	2.75		3
PE 101	Physical Education 1	1.00		2
CWTS	Civic Welfare Training Service	2.25		3
SECOND SEMESTER 2007 - 2008				
GE 102	Communication Arts 2	2.75		3
GE 202	Plane Trigonometry	2.25		3
CS 121	Microsoft with Internet	2.25		3
CS 112	Computer Programming 2	2.75		3
GE 302	Phil. Gov't. with New Constitution	2.50		3
GE 111	Gamiting Filipino, Komposisyon	3.00		3
PE 102	Physical Education 2	1.00		2
CWTS	Civic Welfare Training Service	2.00		3
FIRST SEMESTER 2008 - 2009				
GE 103	Technical Writing	2.00		3
GE 211	Physics 1 - Mechanics, Sounds	2.75		3
CS 114	Web Programming	1.75		3
CS 113	Object Oriented Programming	2.75		3
GE 304	Sociology	2.50		3
GE 112	Sining ng Pakikipagtalastasan	2.00		3
CS 401	Free Elective 1	3.00		3
PE 103	Physical Education 3	1.25		2

Erasures invalidate it unless countersigned by the Registrar.

Remarks: _____

Continued on next page.

GRADING SYSTEM:

98-100 = 1.00	89-91 = 1.75	80-82 = 2.50
95-97 = 1.25	86-88 = 2.00	77-79 = 2.75
92-94 = 1.50	83-85 = 2.25	75-76 = 3.00

DRP	-OFFICIALLY DROPPED
UD	-UNAUTHORIZED DROPPING
NFE	-NO FINAL EXAMINATION

Not valid without seal.

Date May 18, 2011
Prepared by asespero
Verified by dalibrea

Certified Correct:

DIGNA C. SANCHEZ
Registrar III

PERLIE MARIE H. MACARAIG Ph.D., F.B.E.
College President



Republic of the Philippines

KOLEHIYO NG LUNGSOD NG LIPA

(Formerly Lipa City Public College)

Marawoy-Dagatan, Lipa City

Page 2

**OFFICE OF THE REGISTRAR
OFFICIAL TRANSCRIPT OF RECORDS**

Name ATIENZA, JEFFREY C.

COLLEGIATE RECORD

Course Number	Descriptive Title of the Course	Grades		Credits
		Final	Re-Exam	
<u>SECOND SEMESTER 2008 - 2009</u>				
GE 212	Physics 2 - Electricity, Magnetism	2.00		3
GE 305	Economics	2.25		3
CS 211	Database System	2.25		3
CS 212	Data Structure	2.75		3
CS 231	Digital Design	2.00		3
GE 203	Probability and Statistics	2.50		3
CS 403	Free Elective 2	2.25		3
PE 104	Physical Education 4	2.00		2
<u>FIRST SEMESTER 2009 - 2010</u>				
CS 201	Operating System	2.00		3
CS 202	Programming Language	2.25		3
CS 232	Comp. Org. and Assembly Lang.	1.75		3
CS 204	Automata	2.50		3
CS 205	System Analysis and Design	2.50		3
CS 402	Free Elective 3	2.50		3
CS 321	ITE Elective 1	2.50		3
<u>SECOND SEMESTER 2009 - 2010</u>				
CS 213	Software Engineering	2.25		3
CS 203	Professional Ethics	2.25		3
GE 303	Rizal	2.75		3
GE 122	Philosophy of Man	2.00		2
CS 207	Network and Internet Technologies	2.00		3
CS 311	ITE Elective 2	2.25		3
<u>FIRST SEMESTER 2010 - 2011</u>				
CS 501	Thesis 1	2.25		3
GE 123	PDPR	2.00		3
CS 303	ITE Elective 3	2.50		3
CS 323	ITE Elective 4	1.75		3
<u>SECOND SEMESTER 2010 - 2011</u>				
CS 502	Thesis 2	2.00		3
CS 600	OJT (Practicum)	1.75		6

NOTHING FOLLOWS

A circular orange stamp with a double-lined border. The outer ring contains the text 'NATIONAL LIBRARY' at the top and 'NEW DELHI' at the bottom. In the center, it says 'DSJ 2010' above the number '05043235'. Below the number is a date stamp '21/3/11'.

CERTIFIED TRUE COPY

SIP 2

REFIA A LIBRESA

DATE:

7/6/2022

Remarks: GRADUATED WITH THE DEGREE OF BACHELOR OF SCIENCE IN COMPUTER SCIENCE (BSCS)
AS OF APRIL 15, 2011 UNDER BOARD RESOLUTION NO. 05 SERIES 2011 DATED APRIL 6, 2011.

Date May 18, 2011
Prepared by: asespero
Verified by: dalibrea

Certified Correct:

Digna C. Sanchez
DIGNA C. SANCHEZ
Registrar III


PERLIE MARIE H. MACARAIG, Ph.D., F.B.E.
College President

MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

- a. This medical certificate should be accomplished by a licensed government physician.
- b. Attach this certificate to original appointment, transfer and reemployment.
- c. The results of the following pre-employment medical/physical/psychological must be attached to this form:

- Blood Test
 Urinalysis
 Chest X-Ray
 Drug Test
 Psychological Test
 Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)			AGENCY / ADDRESS
ATIENZA, JEFFREY CUARTO			LGU - MATAASNAKAHOOY
ADDRESS			
#63 BRGY. UPA, MATAASNAKAHOOY, BATANGAS			BRGY IV, M-KAHOOY, BATS
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
32	MALE	SINGLE	Administrative Aide I (Utility Worker I)

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the above named individual and found him/her to be physically and medically FIT / UNFIT for employment.

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PH	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
KARLA M. CARAAN MD.		
AGENCY/Affiliation of Licensed Government Physician:		
Mataasnakahoy, RHU		
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped
113448		
BLOOD TYPE		
OFFICIAL DESIGNATION	DATE EXAMINED	
MHO	9/15/72	



MEDICAL CERTIFICATE
(For Employment)

INSTRUCTIONS

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- b. Attach this certificate to original appointment, transfer and reemployment.
- c. The results of the following pre-employment medical/physical/psychological must be attached to this form:

- Blood Test
 Urinalysis
 Chest X-Ray
 Drug Test
 Psychological Test
 Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)		AGENCY / ADDRESS	
ATIENZA, JEFFREY CUARTO		LGU - MATAASNAKATOY	
ADDRESS		Brgy. IV, M-Katoy, Batangas	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
32	MALE	SINGLE	Administrative Aide I (Utility Worker I)

FOR THE LICENSED GOVERNMENT PHYSICIAN

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SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PH	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
KARLA M. CARAAN MD.			
AGENCY/Affiliation of Licensed Government Physician:			
Mataasnakatoy, RHU			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (kg) Stripped	BLOOD TYPE
(13447)			
OFFICIAL DESIGNATION	DATE EXAMINED		
MD	9/15/22		





St. Joseph HealthCare, Inc.

2ND Floor LIPA CITY COMMERCIAL CENTER, A. MABINI St. Cor. P. Torres St. Lipa City, Batangas
Tel No. : (043) 757-4675

Name: ATIENZA, JEFFREY
Age : 32 Sex : MALE

Patient Pin: SJHI87248
Company: WALK IN

Sample Date: September 10, 2022

LABORATORY REPORT

CLINICAL MICROSCOPY

URINALYSIS

DESCRIPTION	RESULT	NORMAL VALUE
COLOR	YELLOW	
TRANSPARENCY	SLIGHTLY TURBID	
PH	6.0	5.0-8.0
SPECIFIC GRAVITY	1.015	1.005-1.030
SUGAR	NEGATIVE	NEGATIVE
PROTEIN	NEGATIVE	NEGATIVE
White blood cells	0-2/HPF	
RED BLOOD CELLS	0-2/HPF	
A.URATES/PHOSPHATES	RARE	
EPITHELIAL CELLS		
BACTERIA	RARE	
MUCUS THREADS	RARE	
PREGNANCY TEST		

REMARKS:

MYKEE L. DE SILVA, RMT
MEDICAL TECHNOLOGIST LIC#83300

Joe Tan
SPENCER S. MATANABE, MD, FPSP, MHA
PATHOLOGIST LIC#0112723



2ND Floor LIPA CITY COMMERCIAL CENTER, A. MABINI St. Cor. P. Torres St. Lipa City, Batangas
Tel No. : (043) 757-4675

Name:	ATIENZA, JEFFREY	Patient Pin:	SJHI87248
Age :	32	Sex :	MALE
		Company:	WALK IN

Sample Date: 9/10/2022

LABORATORY REPORT

HEMATOLOGY

DESCRIPTION	RESULT	REFERENCE VALUES
RBC	5.52	FEMALE : 4.0-5.4 x 10 ¹² /L MALE : 4.6 -6.0 x 10 ¹² /L
Hemoglobin	163	FEMALE : 120-160g/L MALE : 140-180g/L
Hematocrit	0.47	FEMALE : 0.37-0.47 MALE: 0.40-0.54
MCV	85.9	76-100 fL
MCH	29.5	27-32 pg
MCHC	34.4	32-36%
White blood cells	8.4	5.0-10.0 x 10 ⁹ /L
Segmenters	0.64	0.55-0.68
Lymphocytes	0.29	0.25-0.39
Monocytes	0.07	0.02-0.08
Eosinophils		0 -0.05
Platelet count	267	150-450 x10 ⁹ /L

REMARKS:

MYKEE L. DESILVA, RMT
MEDICAL TECHNOLOGIST LIC#83300

SPENCER S. WATANABE, MD, FPSP, MHA
PATHOLOGIST LIC#0112723

IV



RJ941890

66

**DEPARTMENT OF HEALTH
SHALOM MEDICAL DIAGNOSTIC LABORATORY, INC.
ZENAIDA ARCADE M. H. DEL PILAR ST., BRGY. 2, BATANGAS CITY, BATANGAS**

Phone Number 0437861798

DRUG TEST REPORT

CCF No: R202208120091
 Name: ATIENZA, JEFFREY CUARTO
 Birthdate: 05/18/1990 Age: 32 Gender: M

Transaction Date Time: 8/12/2022 12:00:00AM
 Report Date Time: 8/13/2022 4:38:53PM

Test Method TEST KIT

Purpose

Random - Government Employee

Requesting Parties

LGU MATAASNAKAHOY

Result

Drug/Metabolite	Result	Remarks
METHAMPHETAMINE	NEGATIVE	PASSED
TETRAHYDROCANNABINOL	NEGATIVE	PASSED

Test Conducted By

67 KATE JOANNE BULACLAC CABUNGCAL
 Analyst

Approved By

DR. ALPHA GRACE B CABIC

76

Head of Laboratory

Valid Within 12 Month/s from Transaction Date

This is a DOH-DDB IDTOMIS generated report



St. Joseph HealthCare, Inc.

2F Lipa Commercial Center, Along A. Mabini St., Corner P. Torres St., Lipa City

Department of Radiology

Medical Imaging Report

PIN: SJHI-22-3471

Patient: ATIENZA, JEFFREY

Referring Physician:

Clinical HX/DX:

Examination: CHEST PA

Procedure: RADIOGRAPHY

Date: 9/10/2022

Age: 32 Sex: MALE

Company: WALK-IN

The lungs are clear

Heart is not enlarged

Intact bony thorax

IMPRESSION: NORMAL CHEST X-RAY

RINA S. DE TORRES, RXT

Lic. No. 5285

Radiologic Technologist

JERIC P. MEDINA, MD, FPCR

Lic. No. 91903

Radiologist



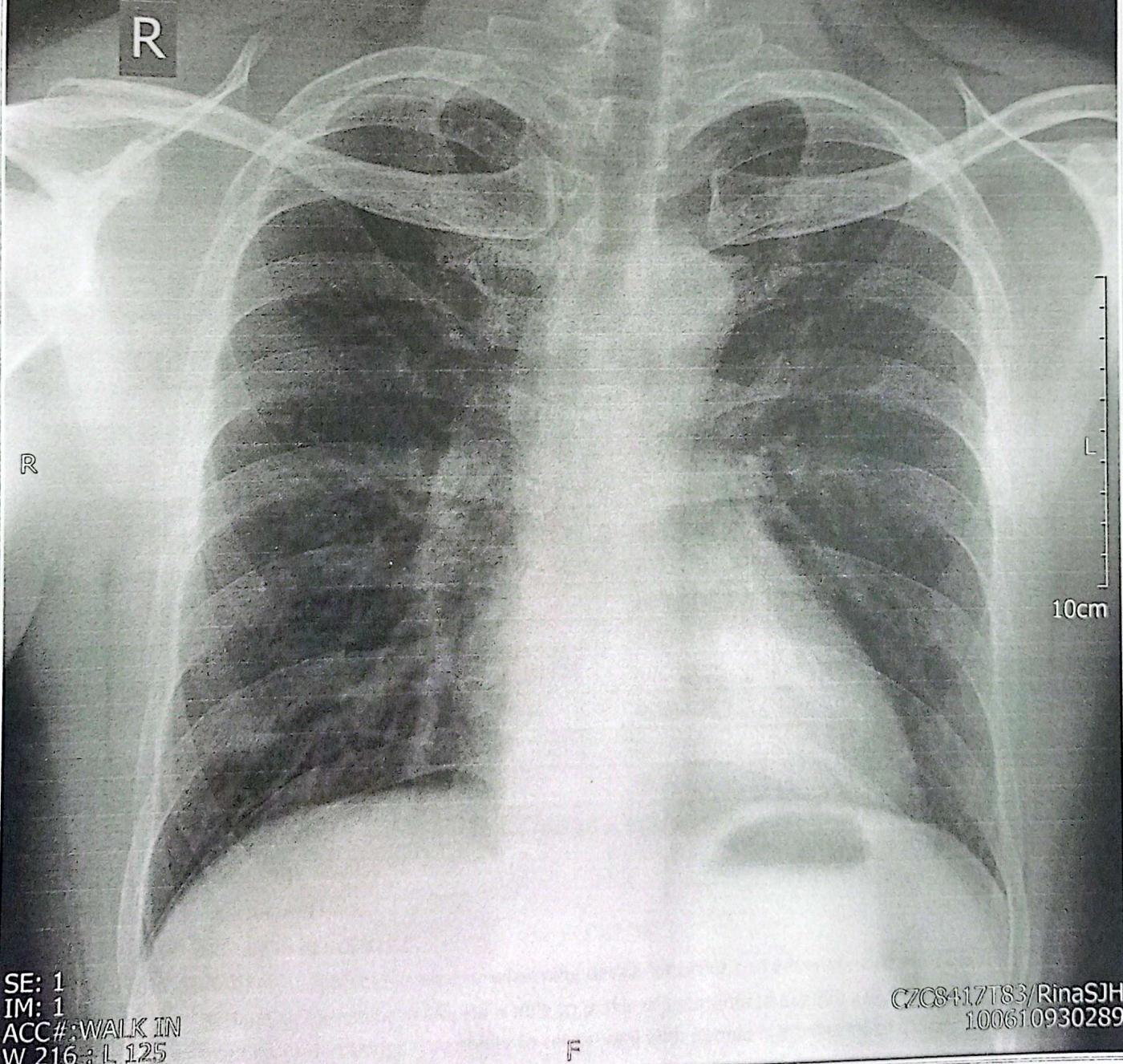
St. Joseph HealthCare, Inc.

2F Lipa Commercial Center, Along A. Mabini St., Corner P. Torres St., Lipa City

Patient ID	SJHI-22-3471	Exam Desc	ATIENZA JEFFREY M/32 (1990/05/18)
Exam Date	2022/09/10		Chest

SJHI-22-3471
ATIENZA JEFFREY M / 32Y
CR12-X

ST. JOSEPH HEALTHCARE INC.
Chest PA
2022.09.10
08:29:16



SE: 1
IM: 1
ACC#: WALK IN
W 216 : L 125

CZQ8417T83/RinaSJH
100610930289



MLT Psychological Evaluation Center

PNP Accreditation No. - 2000 - 0014
Main Office: 316 Quezon Avenue, Quezon City
Telephone No. 929-7261 / 410-6639

TO:

SUBJECT: PSYCHOLOGICAL EXAMINATION

NAME: JEFFREY C. ATIENZA

DATE OF EXAM: 10 Sept. 2022

AGE: 32

CIVIL STATUS: Single

HOME ADDRESS: # 63 Brgy. Upa, Mataasnakahoy, Batangas

EVALUATION REPORT

FACTORS	FINDINGS
Intelligence (Ability to learn & solve problems)	ABOVE AVERAGE
Educational Attainment	BS COMPUTER SCIENCE
Experience (relevance to position)	5 Yrs. JOB ORDER
Motivation: Financial Security	AVERAGE
Change in Assignment	NONE
Honesty/Integrity	AVERAGE
Social Adjustment	AVERAGE
Loyalty (Identifying with superiors)	AVERAGE
Hostility & Violent Tendencies	No trace of violence
Acceptance of Responsibility	AVERAGE
Energy and Initiative	AVERAGE
Independence (self-reliance)	AVERAGE
Self-Discipline	AVERAGE
Steadiness and Endurance Under Pressure	HIGH

SUMMARY

Intelligence Quotient: **105**

Classification: ABOVE AVERAGE

Percentage Score: **37Th PERCENTILE**

Personality Evaluation: Subject has an overwhelming desire for order and advancement after experiencing hardships in life. He is able to make adjustments to acquire good results from his undertakings. The ability to relate well with people is attributed to his good natured attitude.

REMARKS: Recommended

MA. CORAZON J. PAMINTUAN
Psychologist
(Accreditation No. 130)

Valid for (6) months from date of issue.

NATIONAL BUREAU OF INVESTIGATION NATIONAL BUREAU OF INVESTIGATION
BUREAU OF INVESTIGATION NATIONA BUREAU OF INVESTIGATION
NATIONAL BUREAU OF INVESTIGATION NATIONA BUREAU OF INVESTIGATION



Republic of the Philippines
Department of Justice
National Bureau of Investigation



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.

A352EJRY09-LA1189052

FAMILY NAME
ATIENZA

MIDDLE NAME
CUARTO

ADDRESS
LOBRIN ST BRGY UPA MATAASNAKAHOY BATANGAS

DATE OF BIRTH
May 18, 1990

CITIZENSHIP
FILIPINO

PURPOSE

MULTI-PURPOSE CLEARANCE

REMARKS
NO DEROGATORY RECORD

VALID UNTIL

July 05, 2023

FIRST NAME
JEFFREY

HUSBAND'S SURNAME

PLACE OF BIRTH

BRGY UPA MATAASNAKAHOY, BATANGAS

CIVIL STATUS
SINGLE

GENDER
MALE

SIGNATURE



Date Printed: Tuesday, July 19, 2022 07:19 AM

Agency LA

CASID MILA

O.R. No. MR4EGKCTR8

O.R. Date 07/05/2022 8:20:40 AM

DST PAID

DATID MILA

BIOID MILA

RECID- cryzc2

INTID

PRTID MILA

Medardo G. de Lemos
ATTY. MEDARDO G. DE LEMOS
Officer-in-Charge



A352EJRY09-LA1189052



Municipal Form No. 102
(Revised 1983)

REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH
(Fill out completely, accurately and legibly in ink or typewriter)

(To be accomplished in triplicate.)

PROVINCE Batangas

CITY/MUNICIPALITY Matas na kahoy

LOCAL CIVIL REGISTRY NO. 90-166

1. NAME (First) JEFFREY (Middle) CUARTO (Last) ATIENZA

2. SEX (Place 'X' on appropriate answer) 1 Male 2 Female

3. DATE OF BIRTH (Day) 18 (Month) MAY (Year) 1990

4. PLACE OF BIRTH (Name of Hospital/Institution; if not in hospital, give street/barangay) Barangay Matas na kahoy

(City/Municipality) Matas na kahoy (Province) Batangas

5a. TYPE OF BIRTH (Place 'X' on appropriate answer)

b. IF MULTIPLE BIRTH, CHILD WAS

1 Single 2 Twin 3 Three or more

1 First 2 Second 3 Third, 4th, etc.

Father Mother

6. MAIDEN NAME Josephine Encarnacion (First) CUARTO (Last)

7. NATIONALITY Fil 8. RELIGION R. Catholic

9. NAME (First) OSCAR (Middle) MACABANAH (Last) ATIENZA

10. NATIONALITY Fil 11. RELIGION R. Catholic

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important if not applicable, fill Affidavit of Acknowledgment at the back)

June 10 1984 Tarlac Batangas

13. CERTIFICATE OF ATTENDANT AT BIRTH

I hereby certify that I attended the birth of the child who was born alive at 12:20 o'clock a.m./p.m. on the date stated above.

Signature Sylvia

Name in print LEONIDA B. REYES

Address Barangay Matas na kahoy

Title or position Midwife

Date May 24, 1990

14. INFORMANT

Signature Sylvia

Name in print OSCAR M. ATIENZA

Address Barangay Matas na kahoy

Relationship to child FATHER

Date May 24, 1990

15a. PREPARED BY

Signature Sylvia

Name in print LEONIDA B. REYES

RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR

Title or position Midwife

OFFICIAL SEAL

Date May 24, 1990

Name NENITA A. AUSIS

Name in print ASST. REG. OFFICER

Title or position May 24, 1990 2640

Date May 24, 1990

16a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT

b. DATE WHEN INFORMATION WAS SUPPLIED

(Important: Informant should also provide information for Items 17 to 25. The Code boxes are to be filled out of the Office of the Local Civil Registrar)

Local Civil Registry No. 9000166 Status 1

8 15

RESERVE FOR BINDING

PROVINCE Batangas

CITY/MUNICIPALITY Matas na kahoy

Child

17. Weight at Birth (In grams) 7500 5400 16 18. Birth Order of Child Ex. first, second, etc. Fourth 04 20

19a. Total Number of Children Born Alive 04 22

b. How many children are now living including this birth? 4 04 24 c. How many children were born alive but are now dead? 0 00 26

20. Usual Occupation Housekeeper

21. Age at the time of this Birth 23 23 31

22. Usual Residence (Barangay) Barangay Matas na kahoy

(City/Municipality) Matas na kahoy (Province) Batangas 33

23. Usual Occupation Soldier (PAP)

24. Age of the time of this Birth 28 28 41

25. Attendant at Birth

(Place 'X' on appropriate answer) 1 Physician 2 Nurse 3 Midwife 4 Pilot 5 Others 3 43

Sex <u>1</u>	Date of Birth <u>180590</u>	Place of Birth <u>10181</u>	Mother's Nationality <u>1</u>	Father's Nationality <u>1</u>
44	45	51	56	57

NAME OF CHILD				
First <u>JEFFREY</u>	M.I. <u>C</u>	Last <u>ATIENZA</u>	58	70 71

08210-FF-105MIR-00105-BI027

BEST POSSIBLE IMAGE



T10508210105001050624202207
PP700678983

BReN
01018-A90JJ01-6

Documentary
Stamp Tax Paid

CDGM

CLAIRE DENNIS S. MAPA, Ph. D.
National Statistician and Civil Registrar General
Philippine Statistics Authority



REPUBLIC OF THE PHILIPPINES
REPUBLIKA NG PILIPINAS
COMMISSION ON HIGHER EDUCATION
KOMISYON NG LALONG MATAS NA PAARALAN

KOLEHIYO NG LUNGSOD NG LIPA

LIPA CITY, PHILIPPINES

To All Persons to Whom These Presents May Come, Greetings!

SA LAHAT NG TAO NA MAKAKATUNGHAY NG KASALATANG ITO, MAPITAGANG PAGBATI!

Be it known that the Board of Trustees by the authority of the

IPINABABATID NA ANG LUPON NG KATIWALA SA KAPANGYARIHAN NG

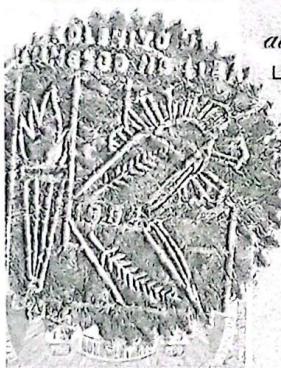
Commission on Higher Education and on recommendation of the Faculty has conferred upon
KOMISYON NG LALONG MATAAS NA PAARALAN AT SA TAGUBILIN NG MGA GURO AY NAGGAWAD KAY

Jeffrey C. Atienza

who has fulfilled all the requirements of the course

NA NAKATUPAD SA LAHAT NG HINIHINGI NG KURSO / TITULO

Bachelor of Science in Computer Science



all the rights, honors and privileges as well as the obligations and responsibilities thereunto appertaining.
LAHAT NG KARAPATAN, KARANGALAN AT PRIBILEHIYO PATI NA ANG TUNGKULIN AT PANANAGUTAN NA DITOY NAUUKOL.

In testimony whereof, the seal of the College and the signatures of the President and

BILANG KATUNAYAN, ANG TATAK NG KOLEHIYO AT ANG MGA LAGDA NG FANGULO AT

the Chairman of the Board of Trustees are hereby affixed.

TAGAPANGULO NG LUPON NG MGA KATIWALA AY INILAGAY.

Given at Lipa City this 15th day of April in the Year of Our Lord
IPINAGKALOOB SA LUNGSOD NG LIPA NGAYON IKA-15 NG ABRIL TAON NG PANGINOON

Two Thousand and Eleven.

DALAWANG LIBOT LAGING ISA.

PERLIE MARIE H. MACARAIG, Ph.D., F.B.E.
COLLEGE PRESIDENT
PANGULO

HON. MEYNARDO A. SABILI
CHAIRMAN, BOARD OF TRUSTEES
TAGA-PANGULO, LUPON NG KATIWALA

CERTIFIED TRUE COPY

SIG:

DELIA A. LIBRADA

DATE:

7/6/2022