

## Republic of the Philippines Tourism Infrastructure & Enterprise Zone Authority

## MEMORANDUM

FOR

ASSISTANT CHIEF OPERATING OFFICER

Asset Management Sector

THRU

THE MANAGER

Operations Department, AMS

**FROM** 

RESIDENT MANAGER

Zamboanga Golf Course and Beach Park

**SUBJECT** 

REPLACEMENT OF THE RESIGNED JO EMPLOYEE

porchase

DATE

19 JULY 2021

In reference with the resigned Job Order Employee, Luciano Jacinto, Jr., who was assigned in the maintenance of the nursery and propagation of flowering and ornamental plants, we would like to request approval to hire Vladimir B. Guevarra as replacement of Mr. Jacinto.

Mr. Guevarra will perform the following duties:

- Maintain the Plant Nursery. Plant flowering and ornamental plants which will be used for the beautification of the Zamboanga Beach Park. Will also propagate plants for sell.
- 2. Landscape or beautify the beach area from the main gate.
- 3. Maintain the cleanliness of the Beach Park Latrines.
- 4. Performs other duties that may assign from time to time.

Please note that his service will also augment the manpower requirement for the reopening of the ZBP.

For your approval, sir





concerced.	ation made in the Personal Data Sheet and th					/criminal case/s	against the p	person
	TO FILLING OUT THE PERSONAL DATA SH S ) and use separate sheet if necessary. Indicate				M. 1. CS ID No.		(Do not fill up. Fo	or CSC use only
I. PERSONAL INFORMATIO	)N							
2. SURNAME	GOLVARTA							
FIRST NAME	VlAdimir					NAME EXTENSION (JR.	, SR)	
MIDDLE NAME	BACA1A							
3. DATE OF BIRTH		16. CITIZENSHIP		Filipin		Dual Citizenship		
(mm/dd/yyyy)	05-30-1997			≥ Finpir	ю Ц		by naturaliz	ation
4. PLACE OF BIRTH	Jambonga city	If holder of dual citize	enship,					Charles Ann
5. SEX	Male Female	please indicate the d			***			•
6 CIVIL STATUS	Single Married Widowed Separated Other/s:	17. RESIDENTIAL ADDRESS	Hou	se/Block/Lot No	).	Upper C	Street	N J.C
7. HEIGHT (m)	5'4	1	Sut	ndivision/Village			Barangay	
		-		ty/Municipality			Province	
8. WEIGHT (kg)	49 kg	ZIP CODE	700		Dill. I	PPU CH	ANAN	T.C.
9. BLOOD TYPE	'A'	18. PERMANENT ADDRESS	Hou	se/Block/Lot No	).	714 011	Street	w
10. GSIS ID NO.	N/A	1	Sut	ndivision/Village	)		Barangay	
11. PAG-IBIG ID NO.	N/A		C	ty/Municipality			Province	
12. PHILHEALTH NO.	N/A	ZIP CODE	70	00				
13. SSS NO.	NA	19. TELEPHONE NO.						
14. TIN NO.	714-340-765	20. MOBILE NO.	095	5644	351	5		
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)						
II. FAMILY BACKGROUND								The same
22. SPOUSE'S SURNAME	N/A		23. NAME of CH	ILDREN (Write	e full name and	list all)	DATE OF BIRT	TH (mm/dd/yyyy
FIRST NAME	RI/A	NAME EXTENSION (JR., SR)	APRI	LVN G	IVA G	vevork	2 04-2	27-201
MIDDLE NAME	N/A		/	7 (1)	1971			
OCCUPATION	N/A							
EMPLOYER/BUSINESS NAME	4/A		1					
BUSINESS ADDRESS	N/A		1					
TELEPHONE NO.	N/A		+					
24. FATHER'S SURNAME	GUEVATTA		+					
0-10-00-00-00-00-00-00-00-00-00-00-00-00	PASCUAL	NAME EXTENSION (JR., SR)	-					
FIRST NAME MIDDLE NAME	Francisco		-					
25. MOTHER'S MAIDEN NAME	Prancisco		-					
SURNAME	RADATA		+					
	BACA /A		+					
FIRST NAME	AngeliTA GAMOREZ		+	IC.	ontinua on sa	parate sheet if neces	ssarvi	
III. EDUCATIONAL BACK	GROUND				DESCRIPTION OF SE			TA ISSUED
				DEDICE OF	ATTENDANCE	HIGHEST LEVEL/		SCHOLARSHII
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGI (Write in full)		From	ATTENDANCE To	UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED
ELEMENTARY	South com Elem Schl			2004	2009		2009	
SECONDARY	N/A							
VOCATIONAL / TRADE COURSE	N/A							
COLLEGE	H/A							
GRADUATE STUDIES	N/A							
		Continue on separate sheet if ne	cessary)			,		
SIGNATURE		8		DA	ATE	July 1	9 200	(

a. within the third degree?     b. within the fourth degree (for Local Government Unit - Car	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:				
35. a. Have you ever been found guilty of any administrative of	☐ YES ☑ NO If YES, give details:				
b. Have you been criminally charged before any court?	☐ YES ☐ NO  If YES, give details:  Date Filed:  Status of Case/s:				
36. Have you ever been convicted of any crime or violation of a by any court or tribunal?	☐ YES ☐ NO If YES, give details:				
37. Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, e out (abolition) in the public or private sector?	☐ YES ☐ NO If YES, give details:				
38. a. Have you ever been a candidate in a national or local ele Barangay election)?	☐ YES ☐ NO If YES, give details:				
b. Have you resigned from the government service during to election to promote/actively campaign for a national or local	☐ YES ☐ NO If YES, give details:				
39. Have you acquired the status of an immigrant or permanent	☐ YES ☐ NO If YES, give details (country):				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)					
Are you a member of any indigenous group?		☐ YES If YES, please specify:	NO		
b. Are you a person with disability?		☐ YES	NO		
c. Are you a solo parent?		If YES, please specify ID No  YES  If YES, please specify ID No	NO		
41. REFERENCES (Person not related by consanguinity or affinity to applicate	nt /appointee)				
NAME	ADDRESS	TEL. NO.			
nins Claire Borga	PASONANCA IC		6		
nins Claire Borga mins Elinor Fabriga	PASONANCA JC PUNK 5 GW = Vil.				
42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertiphilippines. I authorize the agency head/authorized repressagree that any misrepresentation made in this document administrative/criminal case/s against me.	inent laws, rules and regulations of the sentative to verify/validate the contents state	Republic of the ed herein.	РНОТО		
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance	Chan				
Government Issued ID:					
ID/License/Passport No.:	оох)				
Date/Place of Issuance:		Right Thumbmark			
SUBSCRIBED AND SWORN to before me this	, affiant exhib	ting his/her validly issued govern	ment ID as indicated above.		
	Person Administering Oa	th			

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N/A								
H/A								
A/A								
MIA								
N/A								
N/A								
WORK EXPERIENC		(Con	tinue on separate sheet	if necessary)				
clude private employn	ent. Start from your recen	t work) Descriptio	n of duties should b	e Indicated in the attach	ed Work Exp	erience shee SALARYI JOB/ PAY		
3. INCLUSIVE DATES (min/dd/yyyy)  From To  (Write in full/Do not abbreviate)		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)	
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ine 2017 Feb.	218 Garden	Aid	Dept 0	+ Tourism	180km 096 bl.	ry	Emerge Emerg Emerg	ency
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