**P E R S O N A L D A T A S H E E T N B C - 4 6 1**

***NOTE:*** *This form will be filled out by the faculty members of a State College or University.*

**INSTRUCTIONS:**

1. Fill out this form accurately and legibly, typewritten or handwritten. Refer to attached notes for details.
2. For additional space use the same size of bond papers. Follow the same format.
3. All claims must be supported by documents.
4. Cut-off date of documents claimed for evaluation is from **July 1, 2013 to June 30, 2016.**

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| NAME: |  | |  | |  |
|  | *Last Name* | | *First Name* | | *Middle Initial* |
| DATE OF BIRTH: |  | |  | |  |
| CIVIL STATUS: |  | | | SEX: |  |
| HOME ADDRESS: |  | | | TEL. NUMBER: |  |
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| MAILING ADDRESS: |  | | | TEL. NUMBER: |  |
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| INSTITUTION: |  | | | | |
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| COLLEGE: |  | | | | |
| DEPARTMENT: |  | | | | |
| PRESENT RANK: |  | | | | |
| SUB RANK: |  | | | | |
| STATUS OF APPOINTMENT**:** |  | | | | |
| ANNUAL SALARY: |  | | | | |
| DATE OF LAST APPOINTMENT/NOSA: | |  | | | |

1. **EDUCATIONAL QUALIFICATIONS (85 points maximum)**
   1. Highest relevant academic degree or educational attainment. [SD: *Transcript of Records, Diploma/Certificate and Special Order (in case of those who graduated in Private Higher*

*Education Institutions*)].  *In case of research-work graduate program, certified true copy of diploma and periodic evaluation of research*

*from the supervisor/adviser shall be presented.*

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| **DEGREE EARNED** | **SPECIALIZATION** | **INSTITUTION** | **YEAR OBTAINED** |
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* 1. Additional equivalent degree earned related to the present position. [SD: *Transcript of Records, Diploma/Certificate and Special Order (in case of those who graduated in Private Higher Education*

*Institutions*)].

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| **DEGREE/S OBTAINED** | **SPECIALIZATION** | **INSTITUTION** | **YEAR OBTAINED** |
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* 1. Additional credits earned. (Maximum of **10 points**)
     1. For every 3-unit credit earned towards an approved higher degree course. (SD: Transcript of Records or Report of grades duly certified by the University Registrar**)**

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| BACCALAUREATE | **MASTERAL** | **DOCTORAL** |
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| **Complete Title of Thesis:** |  |
| **Complete Title of Dissertation:** |  |

**2. EXPERIENCE AND LENGTH OF SERVICE. (25 points maximum)**

* 1. **Academic Experience**

**2.1.1** For every year of full-time academic service in state institution of higher learning. **(1 point per year)**

*(SD: Service Record and/or Official Designation)*

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**2.1.2** For every year of full-time academic service in an institution of higher learning other than SUCs, CHED-Supervised and TESDA Schools; servicein

a public or private research institution. **(0.75 points per year)** (*SD: Service Record, Appointment/Contract)*

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* 1. **Administrative Experience**

For every full-time year of administrative experience. (*SD: Service Record, Appointment and or Designation,* Organizational Structure which shows that the designee has at least 4

subordinates*)*

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**2.3 Others**

**2.3.1** For every year of relevant full-time professional and technical experience. (SD: Service Record/Service Contract, Appointment and/ or designation,

SEC/DTI registration for entrepreneur)

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**2.3.2** For every year of experience in the public and private basic institution. (SD: Appointment/Designation, Service Record for Basic Education Teachers)

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**3. PROFESSIONAL DEVELOPMENT, ACHIEVEMENT AND HONORS (90 points maximum)**

*(Credentials needed – Primary documents pertinent to the claim and endorsement by the President)*

**3.1 Discoveries, patented inventions, innovations, publications and other creative works. (Maximum of 30 points)**

* + 1. For every cost and time saving innovation, patented invention and creative work as well as discovery of an educational, technical, scientific and/or cultural value. (SD: *Inventions*: Patent Certificate, Utility Model Certificate; *Discoveries*: Full description of the discovery, Confirmation of an international or national agency/ organization/association of experts, Evidences of dissemination and utilization; *Creative work:* Full description of the creative work, Evidences that shall satisfy the criteria for evaluation, Appropriate certification from the duly organized committee establishing the value of the output, *Research results and innovations*: Full description of research/innovation, Evidences that shall satisfy the criteria for evaluation)

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| **NATURE OF INVENTION/INNOVATION/CREATIVE WORK** | **PATENT NO. (If any)** | **YEAR PATENTED** |
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* + 1. For every published book, original, edited, or compiled copyrighted/published within the last ten years. (SD: Copy of the book with copyright and ISBN)

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| NATURE | **COMPLETE TITLE** | **ROLE** | **PUBLISHER** | **DATE OF PUBLICATION** |
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* + 1. For every scholarly research/monograph/educational/technical articles in a technical/scientific/professional journal including electronic and digital journals included in the lists of CHED, ISI, Harvard, SCOPUS and other journals of sterling reputation for international and national. Local journals refer to institutional research-based publications. *(SD: Copy of the journal with ISSN, Proof of circulation for local journals)*

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| **TITLE OF RESEARCH/JOURNAL/MONOGRAPH** | **ROLE** | **PUBLISHER** | **DATE PUBLISHED** |
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* + 1. For every instruction manual/audio-visual material developed and approved for use. *(SD: Copy/ sample of material, Certificate of utilization, Course Syllabus, Evidence of circulation such as receipts of sale, IPRO clearance for institutional circulation, approval for institutional use by the instructional material review body)*

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| TYPE OF MANUAL/AUDIO-VISUAL MATERIAL | **TITLE OF MANUAL/AUDIO-VISUAL MATERIAL** | **DATE DEVELOPED** |
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**3.2 For every service, training and active participation in professional/technical activities (Maximum of 30 points)**

**3.2.1** Training and Seminars **(Maximum of 10 points)** *(SD:* Certificate of Attendance/ Appreciation/ Participation*)*

**3.2.1.1** For every training course with a duration of at least one month not to exceed the full credit (P=No. of days/30)

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| TITLE OF TRAINING | **SPONSORING AGENCY** | **LEVEL (intl., natl, regl, local)** | **INCLUSIVE DATES** |
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**3.2.1.2** For participation in conferences, seminars, workshops (*must be relevant to one’s assignment/field)*

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| **TITLE OF SEMINARS/WORKSHOPS/CONFERENCE** | **NATURE OF PARTICIPATION** | **SPONSORING AGENCY** | **DATE** |
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**3.2.2** Expert Services Rendered (Maximum of 20 points)

* + - 1. For serving as a short-term consultant/expert in activity of an educational, technological, professional, scientific, or cultural nature (foreign or

local) sponsored by the government or other agencies. (SD: *Memorandum of Agreement or contract between the institution and the contracting party, or office*

*order pertaining to the consultancy work, Acknowledgment of output)*

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| NATURE/AREA OF CONSULTANCY | **COUNTRY** | **SPONSORING AGENCY** | **INCLUSIVE DATES** |
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* + - 1. For services rendered as coordinator, lecturer, resource person, or guest speaker in conferences, workshop, and/or training courses.

*(SD: Certificate of appreciation/recognition, List of Participants, Invitation and copy of the program, Lecture)*

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| **TITLE OF CONFERENCE/WORKSHOP** | **NATURE OF PARTICIPATION** | **SPONSORING AGENCY** | **INCLUSIVE DobeATES** |
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**3.2.2.3** For every service as adviser in doctoral dissertations, masteral and undergraduate thesis or their equivalents as requirement’s for the completion of academic programs. (**Maximum of 10 points)** *(SD: Approval Sheet , Certificate of Teaching Load)*

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| TITLE OF PAPER | **NATURE** | **INCLUSIVE DATES** |
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**3.2.2.4** For certified services as reviewer/examiner in the Professional Regulations Commission (PRC) or in the Civil Service Commission (CSC)

*(SD: Appointment or contract, Identification card)*

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| NATURE/AREA | **AGENCY** | **INCLUSIVE DATES** |
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**3.2.2.5** For expert services in accreditation work as member of the Board of Directors, Members of the Technical Committee or Consultant Group in

regional or national agencies. *(SD: Appointment/designation/invitation from the accrediting body, Identification Card)*

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| NATURE/AREA | **COMPANY/AGENCY** | **INCLUSIVE DATES** |
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**3.2.2.6**  For every year of expert service as testing officer/assessor in trade skills certification.

*(SD: Certificate of Trade Skill Examiner, Results of the examinations conducted)*

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| TRADE SKILL CERTIFICATE | **LEVEL** | **DATE ACQUIRED** |
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* + - 1. For every year of services as coach /trainer of the students in official activities and adviser of accredited students organization.

*(SD: Office Order, Proof of output)*

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| NAME OF SPORTS/STUDENT ASSOCIATION | **ROLE** | **INCLUSIVE DATES** |
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**3.3 MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS/HONOR SOCIETIES, AND HONOR RECEIVED. (Maximum of 10 points)**

**3.3.1** For current individual membership in relevant professional organizations. *(SD: Certificate of membership or Identification card or Official receipt of membership)*

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| NAME OF ORGANIZATION | **POSITION** | **DATE OF MEMBERSHIP** |
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* + 1. For academic honors earned. *(SD: A certificate or copy of a permanent record of the school)*
       1. Undergraduate Degree

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| Honors Received | **Degree/s Obtained** | **Institution/Address** |
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* + - 1. Graduate Degree

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| HONORS RECEIVED | **DEGREE/S OBTAINED** | **INSTITUTION/ADDRESS** |
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* + 1. Scholarship/Fellowship. This may be degree-granting or non-degree-granting.

*(SD: Certificate of scholarship/ fellowship award, Proof of completion of fellowship program or activity/ Transcript of Records, Scholarship contract/ agreement)*

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| **TITLE OF SCHOLARSHIP/FELLOWSHIP** | **NATURE(Competitive/Non-Competitive)** | **SPONSOR** | **INCLUSIVE DATES** |
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* 1. Awards of Distinction Received in Recognition to Achievement in relevant areas of specialization/profession and/or assignment of the faculty concerned.

*(SD: Plaque of Recognition or copy of citation, Criteria for the selection, Proof of competition)*

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| **TITLE OF AWARD OF DISTINCTION** | **FIELD OF SERVICE** | **GRANTEE ORGANIZATION** | **LEVEL (International, National, Regional & Local)** |
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**3.5** Community Outreach **(Maximum of 5 points)** *(SD: An Office Order pertaining to the services rendered, Certificate/ Acknowledgement of Completion of project or activity)*

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| **NATURE OF OUTREACH PROGRAM** | **NATURE OF PARTICIPATION** | **BENEFICIARY/IES/ADDRESS/ SPONSORING AGENCY** | **DATES** |
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* 1. Professional Examinations. **(Maximum of 10 points)** *(SD: Certificate of Licensure, Rating Slip, Skills Certificate/Identification Card)*

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| **EXAMINATIONS TAKEN** | **DATE OF EXAMINATION** | **RATING** | **PLACE** |
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**IV. REQUIREMENT FOR APPOINTMENT TO THE POSITION OF PROFESSOR**

1. Books, monograms, compendiums and major bodies of published works.

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| Nature (books, articles, films, instructional manual) | **Complete Title** | **Role** | **Publisher** | **Date of Publication** |
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1. Scientific articles in publications of international circulations, and other works of similar nature.

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| Nature (books, articles, films, instructional manual) | **Complete Title** | **Level (**Int’l,Nat’l,Reg’l, Local, Inst’l | **Publisher** | **Date of Publication** |
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1. Discoveries, Inventions, and other significant original contributions.

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| Nature of Discoveries/Inventions | Patent Number | Year Patented |
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D. Research recommendations transformed to public policy benefiting to the country, and other creative works.

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| Complete Title of Research | **Level: Int’l./Nat’l/Reg’l/Local/Inst’l** | **Sponsoring Agency** | **Inclusive Dates** |
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E. Supervision, tutoring, or coaching of graduate scientists and technologies.

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| Nature/Area of Supervision/Tutoring coaching | **Country** | **Sponsoring Agency** | **Level: Int’l./Nat’l/Reg’l/Inst’l** | **Inclusive Dates** |
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F. Research results applied or utilized in industrial and/or commercial projects or undertaking.

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| Complete Title of Research | **Level: Int’l./Nat’l/Reg’l/Local/Inst’l** | **Sponsoring Agency** | **Inclusive Dates** |
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I hereby certify to the correctness and accuracy of the information provided herefore.

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*Signature*

Subscribe and sworn to before me this \_\_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_. Affiant exhibiting to me his/her residence certificate number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ issued at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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*Chief Administrative Officer*