| 36. | | Are you related by consanguinity or affinity to any of the following: | | |
|--|---|---|---------------------------------------|---|
| | a.) Within the third degree(for the National Government Employees Appointing authority, recommending authority, chief of office/bureau/department or person who has | | If YES LI NO If YES, give details | |
| | immediate supervision over you in the Office, Bureau or Department where you will be appointed? | | | |
| | | | | |
| | b.)Within the fourth degree (for Local Government Er | nplovees) | ☐ YES ☐ NO | |
| | Appointing authority or recommending authority where you will be appointed? | | If YES, give details | |
| | | | | |
| | | | | |
| 37 | | | | |
| | a.) Have you ever been formally charged? | | YES NO | |
| | | | If YES, give details | |
| | | | | |
| | b.) Have you been guilty of administrative offense? | | | |
| | | | YES NO | |
| | | | If YES, give details | |
| | | | | |
| | | | | |
| 38 | | | | |
| | Have you ever been convicted of any crime or violation | YES NO | | |
| | regulation by any court or tribunal? | If YES, give details | | |
| | | | | |
| | | | | |
| 39 | | | | _ |
| | Have you ever been separated from the service in an | YES NO | | |
| | retirement, dropped from the rolls, dismissal, termina | If YES, give details | | |
| | phased out, in the public or private sector? | | | |
| | | | | |
| 40 | | | YES NO | |
| | Have you ever been candidate in the national or local | If YES, give details | | |
| | | | | |
| | | | | |
| Pursuant to: (a) Indigenous People's Act (RA 8371) (b) Magna Carta for disabled persons (RA 727) | | | | |
| | and (c) Solo Parents Welfare Act of 2000 (RA 8972) | | | |
| | a.) Are you a member of indigenous group? | YES NO | | |
| | | | If YES, please specify : | |
| | | | | |
| | b.) Are you differently abled? | ☐ YES ☐ NO If YES, please specify : | | |
| | | | ii 120, piedoe spesity : | |
| | c.) Are you a solo parent? | | YES NO | |
| | | | If YES, please specify : | |
| 42. RE | EFERENCES (Person not related by consaguinity or af NAME | finity to applicant/appointee) ADDRESS | TEL. NO. | |
| | INVINE | ADDITEO | 122.110. | |
| | | | | |
| _ | | | | |
| 43 | | is been accomplished by me, and is a true, correct and | | |
| complete statement persuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. | | | | |
| | | | | |
| | I also authorize the agency head/ authorized represen | | | |
| <u> </u> | that this information shall remain confidential. | РНОТО | _ | |
| | | | | |
| | COMMUNITY TAX CERTIFICATE NO. | | | |
| | | | | |
| | IONIED AT | | | |
| | ISSUED AT SIGNATURE (Sign inside the box) | | | |
| | February 12, 2012 | | | |
| | ISSUED ON (mm/dd/yyyy) | DATE ACCOMPLISHED | RIGHT THUMBMARK | |
| <u> </u> | | | | |
| | | | CS EODM 242 (Position 2005) Page 4 of | _ |
| <u> </u> | | | CS FORM 212 (Revised 2005) Page 4 of | 4 |