



REPUBLIC OF THE PHILIPPINES
**DEPARTMENT OF INFORMATION AND
COMMUNICATIONS TECHNOLOGY**

APPLICATION FORM

PROGRAMMING

Retake

First Time



Date of Last Attempt in MM/DD/YY format

Michael A. Balivia

Instructions: Fill in all the required information, DO NOT leave an item blank. If item is not applicable, Indicate "N/A".
All applications must be filled PERSONALLY by applicant.

PERSONAL INFORMATION

SURNAME, GIVEN NAME, MIDDLE NAME BALIVIA, MICHAEL, APLAON			MOBILE NUMBER (e.g. 9XXXXXXXXX). 9274952562	
COMPLETE MAILING ADDRESS (Street no., Brgy., Municipality/City, Province) TAYUM STREET, BRGY. 4, KABANKALAN CITY, NEGROS OCCIDENTAL			E-MAIL ADDRESS michaelbalivia@cpsu.edu.ph	
PLACE OF BIRTH KABANKALAN CITY	DATE OF BIRTH (mm/dd/yyyy) 07/25/1994	GENDER M	CITIZENSHIP FILIPINO	CIVIL STATUS SINGLE

COLLEGIATE / TERTIARY EDUCATION (attach certified true copy of transcript of records)

UNIVERSITY / SCHOOL ATTENDED	DEGREE EARNED	INCLUSIVE YEARS Ex. 2019-present
Fellowship Baptist College	Bachlor of Science in Information Technology	2014-2018
N/A	N/A	N/A
N/A	N/A	N/A

IT TRAININGS / SEMINARS (related to chosen examination)

COURSE / SEMINAR TITLE	TRAINING CENTER	TOTAL TRAINING HOURS
N/A	N/A	0.0
N/A	N/A	0.0

EMPLOYMENT INFORMATION

PRESENT OFFICE (DO NOT ABBREVIATE THE NAME) Central Philippines State University	TELEPHONE NUMBER/CONTACT NO. 0
OFFICE ADDRESS Brgy. Camingawan, Kabankalan City, Negros Occidental	OFFICE CATEGORY <input checked="" type="checkbox"/> Gov't <input type="checkbox"/> Private

DESIGNATION / POSITION Information Systems Analyst II	NO. OF YEARS IN PRESENT POSITION 0.2
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For Programming: Check the language that you will use in the exam.

VISUAL BASIC 6.0 C C#
 VISUAL BASIC.NET C++ JAVA

ADDITIONAL INFORMATION: (Check all that apply)				
<input type="checkbox"/> PWD	<input type="checkbox"/> Senior Citizen	<input type="checkbox"/> Solo Parent	<input type="checkbox"/> Member of an IP Group	

IMPORTANT: Per Section 2 (Declaration of Policy) of the Data Privacy Act of 2012, it is the policy of the State to protect the fundamental human right of privacy, of communication while ensuring free flow of information to promote innovation and growth. The State recognizes the vital role of information and communications technology in nation building and its inherent obligation to ensure that personal information in information and communications systems in the government and in the private sector are secured and protected. As such, information collected from this form shall be held in strict confidence and shall only be used solely for records keeping purposes. I hereby certify to the best of my knowledge and information, that these are true and correct. Any information found to be false is a ground for disqualification from taking the Proficiency Examination in the future.

NON-APPEARANCE ON THE EXAM DATE, NO REFUND POLICY

SIGNATURE OF APPLICANT 	DATE ACCOMPLISHED 07/17/2024
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