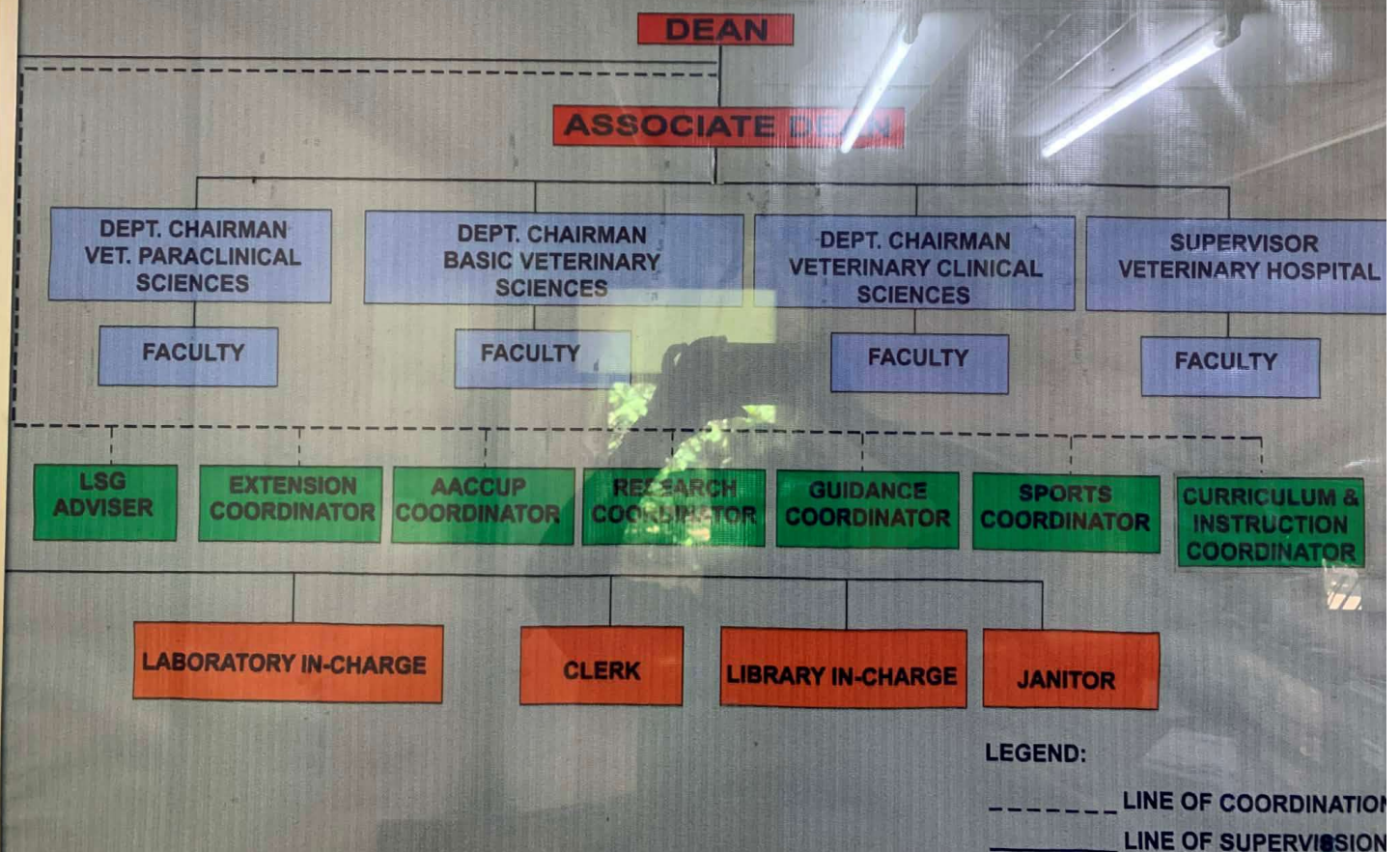




C.3. PDF OF THE MAINTENANCE PERSONNEL.

TABLE OF ORGANIZATION OF THE COLLEGE OF VETERINARY MEDICINE





Republic of the Philippines
UNIVERSITY OF SOUTHERN MINDANAO
Kabacan, Cotabato



COLLEGE OF VETERINARY MEDICINE
Email Add: cvm@usm.edu.ph

Special Order. 03
Series of 2026

TO: LILIAN A. LUMBAO
SUBJECT: Designation as CVM FACULTY LABORATORY SUPERVISOR
DATE: January 5, 2026

Taking cognizance of your educational preparation and most of all you interest to lead the unit, you are hereby designated as **Faculty In-Charge Laboratory** in the College of Veterinary Medicine in addition in your plantilla position.

As such, you shall exercise the following duties and functions:

1. Ensure smooth functioning of the laboratory on a day-to-day basis.
2. Implement and enforce safety protocols and regulations in the lab.
3. Supervise Lab Assistants/Technicians: Manage the lab support staff and ensure their tasks are efficiently performed.
4. Ensure proper setup, maintenance, and repair of lab equipment.
5. Assist faculty in preparing lab exercises and provide guidance to students during lab sessions.
6. Oversee the budget for lab resources, ensuring efficient use of funds.
7. Supervise Lab Aide in keeping accurate records of lab activities, safety checks, experiments, and inventories.
8. Assist faculty and students engaged in research by providing necessary lab resources and equipment.

This designation shall remain in force and in effect on January 04, 2026 until July 31, 2027, unless otherwise revoked by the undersigned or by higher competent authority. All issuances inconsistent with any provisions hereof are deemed revoked, amended or superseded.

DR. ELIZABETH C. MOLINA
CVM Dean

Conforme:

DR. LILIAN A. LUMBAO

"UNITY IN DIVERSITY AND
SUSTAINABLE DEVELOPMENT IN
MINDANAO THROUGH QUALITY AND RELEVANT EDUCATION."



USM-SYS-F71-Rev.2, 2023.12.29

SIGNATURE		DATE	01/14/2025	CS FORM 212 (Revised 2017), Page 1 of 4
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UNIVERSITY OF SOUTHERN MINDANAO
Kabacan, Cotabato
Philippines

CVM LABORATORY STAFF

1.0 Organization

1.1 The Central Laboratory

The Central Laboratory shall be managed by the Laboratory In-charge and manned by one laboratory aide.

1.2 Responsibility and Authority

1.2.1 The Laboratory In-charge

- a. The Laboratory (Lab) In-charge shall be responsible for establishing the Laboratory's commitment to service and their implementation. The Lab In-charge is also responsible for issuing guidelines and procedures and for ensuring efficient laboratory operations.
- b. The Laboratory In-charge shall facilitate the request for purchase, calibration, repair and maintenance of laboratory equipment and facilities.

1.2.2 Laboratory Aide

- a. The Laboratory Aide shall be responsible in the preparation of the instruments needed for the laboratory activities.
- b. The Laboratory Aide shall be responsible for the borrowing, issuing, checking, and returning of lab equipment and measuring instruments.
- c. The Laboratory Aide shall assist the Lab In-charge in the repair and maintenance of the Laboratory as well as in the inventory of equipment
- d. The Laboratory Aide shall be responsible for maintaining the cleanliness and orderliness of the laboratory stockroom.
- e. The Laboratory Aide shall be responsible for the control of documents, forms, and records.

USM-EDL-F:7



UNIVERSITY OF SOUTHERN MINDANAO
Kabacan, Cotabato
Philippines

CVM LABORATORY STAFF

Name	Position	Educational Attainment	Length of Service (years)	Status of Appointment
1. Dr. Lilian A. Lumbao	Prof. II	MSAS	315	Permanent
2. Analira R. Evangelista	Laboratory Aide	College Graduate		Casual / Permanent

PERSONAL DATA SHEET

WARNING: Any misinterpretation 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. CS ID No. (Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	LUMB AO		NAME EXTENSION (JR., SR)	
FIRST NAME	LILIAN			
MIDDLE NAME	ANGELES			
3. DATE OF BIRTH (mm/dd/yyyy)	AUGUST/28/1970	18. 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	AROMAN, CARMEN, COTABATO	If holder of dual citizenship, please indicate the details.		
5. SEX	<input type="checkbox"/> Male <input checked="" 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	NO. 5 3RD BLK. House/Block/Lot No. Street USM HOUSING POBLACION Subdivision/Village Barangay KABACAN COTABATO City/Municipality Province	
7. HEIGHT (m)	1.57m	ZIP CODE	9407	
8. WEIGHT (kg)	87.6 kgs	18. PERMANENT ADDRESS	NO. 31 House/Block/Lot No. Street BLISS HOUSING BALINDOG Subdivision/Village Barangay KIDAPAWAN CITY COTABATO City/Municipality Province	
9. BLOOD TYPE	B ⁺	ZIP CODE	9400	
10. GSIS ID NO.	70082801055	19. TELEPHONE NO.	(064) 572-2604	
11. PAG-IBIG ID NO.	19400015716	20. MOBILE NO.	09159496841	
12. PHILHEALTH NO.	170000305165	21. E-MAIL ADDRESS (if any)	lalumbao@usm.edu.ph	
13. SSS NO.	N/A			
14. TIN NO.	180-053-657			
15. AGENCY EMPLOYEE NO.	93-00473			


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		N/A	N/A
OCCUPATION	N/A		N/A	N/A
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	LUMB AO			
FIRST NAME	CALINICO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	VILLA			
25. MOTHER'S MAIDEN NAME				
SURNAME	ANGELES			
FIRST NAME	WENIFREDA			
MIDDLE NAME	NAVALES			

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 graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	BALINDOG ELEMENTARY SCHOOL	ELEMENTARY DIPLOMA	6/4/1982	6/5/1983		1983	VALEDICTORIAN
SECONDARY	NOTRE DAME OF KIDAPAWAN FOR GIRLS	HIGH SCHOOL DIPLOMA	6/5/1983	6/9/1987		1987	1ST HON. MENTION
VOCATIONAL / TRADE COURSE	NONE						
COLLEGE	UNIVERSITY OF SOUTHERN MINDANAO	DOCTOR OF VETERINARY MEDICINE	6/9/1987	6/10/1993		1983	CUM LAUDE
GRADUATE STUDIES	UNIVERSITY OF SOUTHERN MINDANAO	MASTER OF SCIENCE IN ANIMAL SCIENCE	6/1/1996	6/3/2001		2001	NONE

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/14/2025
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IV. CIVIL SERVICE ELIGIBILITY

27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	P.D. 907 - HONOR GRADUATE (1993)					
	CAREER SERVICE PROFESSIONAL EXAMINATION	85.10	OCT. 1993	KIDAPAWAN CITY		
	VETERINARIAN LICENSURE EXAMINATION	70.88	8/1/1994	PRC, MANILA	0004369	8/28/2017


(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.

28.	INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY JOB/PAY GRADE (if applicable) & STEP (Format "00-00") INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
	From	To						
	12/20/2022	up to present	PROFESSOR II	UNIVERSITY OF SOUTHERN MINDANAO	102,690.00	SG-25-1	PERMANENT	YES
	04/12/2019	12/19/2022	ASSOCIATE PROFESSOR V	UNIVERSITY OF SOUTHERN MINDANAO	P75,000.00	SG-23-1	PERMANENT	YES
	7/26/2017	12/3/2019	ASSOCIATE PROFESSOR IV	UNIVERSITY OF SOUTHERN MINDANAO	P52,783.00	SG-22-1	PERMANENT	YES
	2/1/2016	7/25/2017	ASSOCIATE PROFESSOR III	UNIVERSITY OF SOUTHERN MINDANAO	P47,779.00	SG-21-1	PERMANENT	YES
	3/25/2014	1/31/2016	ASSOCIATE PROFESSOR II	UNIVERSITY OF SOUTHERN MINDANAO	P36,567.00	SG-20-1	PERMANENT	YES
	6/16/2014	3/24/2014	ASSISTANT PROFESSOR IV	UNIVERSITY OF SOUTHERN MINDANAO	P31,696.00	SG-18-3	PERMANENT	YES
	6/1/2012	6/15/2014	ASSISTANT PROFESSOR IV	UNIVERSITY OF SOUTHERN MINDANAO	P31,351.00	SG-18-2	PERMANENT	YES
	6/16/2011	5/31/2012	ASSISTANT PROFESSOR IV	UNIVERSITY OF SOUTHERN MINDANAO	P28,305.00	SG-18-1	PERMANENT	YES
	6/1/2011	6/15/2011	ASSISTANT PROFESSOR III	UNIVERSITY OF SOUTHERN MINDANAO	P26,292.00	SG-17-3	PERMANENT	YES
	6/24/2010	5/31/2011	ASSISTANT PROFESSOR III	UNIVERSITY OF SOUTHERN MINDANAO	P23,555.00	SG-17-2	PERMANENT	YES
	11/2/2009	6/23/2010	ASSISTANT PROFESSOR III	UNIVERSITY OF SOUTHERN MINDANAO	P20,819.00	SG-17-1	PERMANENT	YES
	7/1/2009	11/1/2009	ASSISTANT PROFESSOR II	UNIVERSITY OF SOUTHERN MINDANAO	P20,309.00	SG-16	PERMANENT	YES
	10/22/2008	6/30/2009	ASSISTANT PROFESSOR II	UNIVERSITY OF SOUTHERN MINDANAO	P17,921.00	SG-16	PERMANENT	YES
	7/1/2008	10/21/2008	ASSISTANT PROFESSOR II	UNIVERSITY OF SOUTHERN MINDANAO	P17,464.00	SG-16	PERMANENT	YES
	7/1/2007	6/30/2008	ASSISTANT PROFESSOR II	UNIVERSITY OF SOUTHERN MINDANAO	P15,895.00	SG-16	PERMANENT	YES
	10/22/2005	6/30/2007	ASSISTANT PROFESSOR II	UNIVERSITY OF SOUTHERN MINDANAO	P14,450.00	SG-16	PERMANENT	YES
	10/22/2002	10/21/2005	ASSISTANT PROFESSOR II	UNIVERSITY OF SOUTHERN MINDANAO	P14,098.00	SG-16	PERMANENT	YES
	8/2/2002	10/21/2002	ASSISTANT PROFESSOR I	UNIVERSITY OF SOUTHERN MINDANAO	P13,632.00	SG-15-4	PERMANENT	YES
	7/1/2001	8/1/2002	ASSISTANT PROFESSOR I	UNIVERSITY OF SOUTHERN MINDANAO	P13,300.00	SG-15-3	PERMANENT	YES
	1/1/2000	6/30/2001	ASSISTANT PROFESSOR I	UNIVERSITY OF SOUTHERN MINDANAO	P12,667.00	SG-15-2	PERMANENT	YES
	08/02/1999	12/31/1999	ASSISTANT PROFESSOR I	UNIVERSITY OF SOUTHERN MINDANAO	P11,515.00	SG-15-1	PERMANENT	YES
	9/30/1998	8/1/1999	INSTRUCTOR III	UNIVERSITY OF SOUTHERN MINDANAO	P10,863.00	SG-14-1	PERMANENT	YES
	11/1/1997	9/29/1998	INSTRUCTOR II	UNIVERSITY OF SOUTHERN MINDANAO	P10,248.00	SG-13-4	PERMANENT	YES
	1/1/1997	10/31/1997	INSTRUCTOR II	UNIVERSITY OF SOUTHERN MINDANAO	P8,586.00	SG-13-3	PERMANENT	YES
	1/1/1996	12/31/1996	INSTRUCTOR II	UNIVERSITY OF SOUTHERN MINDANAO	P6,924.00	SG-13-2	PERMANENT	YES
	6/5/1995	12/31/1995	INSTRUCTOR II	UNIVERSITY OF SOUTHERN MINDANAO	P5,500.00	SG-13-1	PERMANENT	YES
	1/23/1995	6/4/1995	INSTRUCTOR I	UNIVERSITY OF SOUTHERN MINDANAO	P5,240.00	SG-12-5	PERMANENT	YES
	9/6/1993	1/22/1995	INSTRUCTOR I	UNIVERSITY OF SOUTHERN MINDANAO	P4,240.00	SG-12-1	SUBSTITUTE	YES

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/14/2025	CS FORM 212 (Revised 2017), Page 2 of 4
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34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed,
 a. within the third degree?
 b. within the fourth degree (for Local Government Unit - Career Employees)?

YES NO
 YES NO
 If YES, give details: _____

35. a. Have you ever been found guilty of any administrative offense?
 b. Have you been criminally charged before any court?

YES NO
 If YES, give details: _____

YES NO
 If YES, give details: _____
 Date Filed: _____
 Status of Case/s: _____

36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?

YES NO
 If YES, give details: _____

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?

YES NO
 If YES, give details: _____

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?

YES NO
 If YES, give details: _____

YES NO
 If YES, give details: _____

39. Have you acquired the status of an immigrant or permanent resident of another country?

YES NO
 If YES, give details (country): _____

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 items:
 a. Are you a member of any indigenous group?
 b. Are you a person with disability?
 c. Are you a solo parent?

YES NO
 If YES, please specify: _____

YES NO
 If YES, please specify ID No: _____

YES NO
 If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL NO.
DR. EMERLIE R. OKIT	USM HOUSING, KABACAN, COTABATO	(064)572-2384
DR. ELIZABETH C. MOLINA	Mapanao St. Ext, Kabacan, 9407 C	(064)572-2384
DR. VRENELIE II D. FLORES	ABELLERA SUBD., KABACAN, COTABATO	(064)572-2384

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.



Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
 PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: **PRC LICENSE (VETERINARIAN)**

ID/License/Passport No.: **PRC LIC. 0004369**

Date/Place of Issuance: **11/22/1994 DAVAO CITY**

Signature (Sign inside the box)
 01/14/2025
 Date Accomplished



SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.

NERISSA G. DELA VINA, PhD
 Person Administering Oath

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.

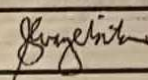
Print legibly. Tick appropriate boxes () and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use only)

2. SURNAME	EVANGELISTA		NAME EXTENSION (JR, SR)	N/A
FIRST NAME	ANALISA			
MIDDLE NAME	RUIZ			
3. DATE OF BIRTH (mm/dd/yyyy)	July 16, 1972	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	Kaya-Kaya, Marbel, Matalam, North Cotabato	If holder of dual citizenship, please indicate the details.		
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female			
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	PUROK 7 Street KATIDTUAN Barangay COTABATO Province	
7. HEIGHT (m)	5'4"	ZIP CODE	9407	
8. WEIGHT (kg)	65 kgs	18. PERMANENT ADDRESS	PUROK 7 Street KATIDTUAN Barangay COTABATO Province	
9. BLOOD TYPE	"0"	ZIP CODE	9407	
10. GSIS ID NO.	006-0165-9450-6	19. TELEPHONE NO.	N/A	
11. PAG-IBIG ID NO.		20. MOBILE NO.	09129174820	
12. PHILHEALTH NO.	17-025021021286-3	21. E-MAIL ADDRESS (if any)	AREvangelista72@yahoo.co IT	
13. SSS NO.	0919575604			
14. TIN NO.	939-601-728			
15. AGENCY EMPLOYEE NO.	99-01844			

22. SPOUSE'S SURNAME	EVANGELISTA	23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ALFREDO	NAME EXTENSION (JR, SR) J.R.	ALJUN R. EVANGELISTA 10/2/1998
MIDDLE NAME	MOYA		ALYZA R. EVANGELISTA 5/22/2003
OCCUPATION	FARMING		RALF R. EVANGELISTA 3/3/2008
EMPLOYER/BUSINESS NAME	N/A		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	N/A		
24. FATHER'S SURNAME	RUIZ		
FIRST NAME	FORTUNATO	NAME EXTENSION (JR, SR) S.R.	
MIDDLE NAME	CAJEGAS		
25. MOTHER'S MAIDEN NAME			
SURNAME	PONGAO		
FIRST NAME	ROSALINDA		
MIDDLE NAME	ORONG	(Continue on separate sheet if necessary)	

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	MARBEL ELEMENTARY SCHOOL	ELEMENTARY LEVEL	1979	1985	N/A	1985	N/A
SECONDARY	MATALAM MUNICIPAL HIGH SCHOOL	HIGH SCHOOL LEVEL	1987	1991	N/A	1991	N/A
VOCATIONAL / TRADE COURSE	KIDAPAWAN TECHNICAL MASTERS	COMPUTER SCIENCE, BASIC	2015	2015	N/A	2015	N/A
COLLEGE	UNIVERSITY OF SOUTHERN MINDANAO	BSAgricultural Economics	1991	1995	N/A	1995	N/A
GRADUATE STUDIES	UNIVERSITY OF SOUTHERN MINDANAO	MASTERS IN PUBLIC ADMINISTRATION	June 2008	Oct. 2008	9 UNITS	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	January 10, 2025
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4. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed,

a. within the third degree? YES NO

b. within the fourth degree (for Local Government Unit - Career Employees)? YES NO

If YES, give details: _____

25. a. Have you ever been found guilty of any administrative offense? 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): _____

26. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal? YES NO

If YES, give details: _____

27. 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? YES NO

If YES, give details: _____

28. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? YES NO

If YES, give details: _____

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? YES NO

If YES, give details: _____

29. Have you acquired the status of an immigrant or permanent resident of another country? YES NO

If YES, give details (country): _____

30. 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 8072), please answer the following items:

Are you a member of any indigenous group? YES NO

If YES, please specify: _____

Are you a person with disability? YES NO

If YES, please specify ID No: _____

Are you a solo parent? YES NO

If YES, please specify ID No: _____

31. REFERENCES (If none, so indicate by conspicuously or affinity to applicant appointing)

NAME	ADDRESS	TEL. NO.
TS ELMA R. ELEVAZO	USM Kabacan, Cotabato	09159918602
R. ELIZABETH C. MOLINA	USM Kabacan, Cotabato	1024
R. EMERLIE R. OKIT	USM Kabacan, Cotabato	1024

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 cases against me.



Government Issued ID (e.g. Passport, UMID, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: SSS

ID/License/Passport No.: 0919575804

Date/Place of Issuance: KIDAPAWAN CITY

[Handwritten Signature]
Signature (Sign inside the box)

[Handwritten Date]
Date Accomplished



SUBSCRIBED AND SWORN to before me this _____ day of _____, 2025, at _____, Philippines, the affiant exhibiting his/her validly issued government ID as indicated above.

NERISSA G. DELA VERA, PhD.
HRMDO Director
Person Administering Oath