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15 AGENCY EMPLOYEE NO	08-00692	21, E-MAIL ADDRESS (if any)		<u> </u>	ajsgarcia	@usm.edu.p	<u>h</u>	
	STATE OF THE STATE		1100					
Z SPOUSE'S SURNAME	GARCIA		23. NAME of CH	ILDREN (Write	full name and	list all)	DATE OF BIRTH	(mm/dd/yyyy
		NAME EXTENSION (JR., SR)		BETHANY	S. GARCIA	1	6/16/2	2020
FIRST NAME MIDDLE NAME	BISHOP			DEJUAN	S. GARCIA		4/27/2	024
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24. FATHER'S SURNAME	SEBASTIAN	NAME EXTENSION (JR , SR)						
FIRST NAME	JUANITO		1				1	
MIDDLE NAME	MIRANDA							
25. MOTHER'S MAIDEN NAME								
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M. EDUCATIONAL BACK	GROUND					14. 单直导入		建设制
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SECONDARY	UNIVERSITY LABORATORY SCHOOL-UNIVERS OF SOUTHERN MINDANAO			1999	1999	N/A N/A	1999	N/A N/A
VOCATIONAL / TRADE COURSE	UNIVERSITY OF SOUTHERN MINDANAO	DIPLOMA IN TEACHING		2009				
COLLEGE	UNIVERSITY OF THE PHILIPPINES-MINDANA	O BS APPLIED MATH			2009	N/A	2009	N/A
GRADUATE STUDIES	MINDANAO STATE UNIVERSITYILIGAN INSTIT OF TECHNOLOGY,	and the second		2003	2008	N/A	2008	N/A
GRADUATE STUDIES	UNIVERSITY OF SOUTHERN MINDANAO	Phd Mathematics E	Louis Indiana		2016	N/A	2016	N/A
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12/16/	/2021		ASSISTANT	PROF IV	MINDAN	IAO (DMS) OF SOUTHERN	Php 45,203	SG 18	PERMANENT	YES
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dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector? 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? Have you acquired the status of an immigrant or permanent resident of another country? 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: Are you a member of any indigenous group? If 1 Are you a person with disability? Are you a solo parent? If 2 REFERENCES (Person not related by consanguinity or affinity to applicant /appointee) NAME ADDRESS PROF. DARYL MAE C. MAMON ,PhD USM,KABACAN,NORTH COTABATO	If YES, give details:
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I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippin the agency head / authorized representative to verify/validate the contents stated herein. I agmisrepresentation made in this document and its attachments shall cause the filing of administrative/or against me.	nes. I authorize
overnment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance	
overnment Issued ID: Employer's ID (Multilian)	
VLicense/Passport No.: 08-00692 Signature (Sign inside the box)	
ale/Place of Issuance: 02/14/2018 TANUMPY 30, 2029 Date Accomplished	Right Thumbmark
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, affant exhibiting his/	her validly issued government ID as indicated above.

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