Revised 2012						
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1	PEDG	ONAL DATA	SHEET			
WARNING: ARY MISS	· LKO	OHAL DAIA		t to the standard		aloat the
person concerned.	ntation made in the Personal Data S	heet and the Work Experience Sheet sh	all cause the filing of admi	nia trativa/orim	mai case/s ay	
		L DATA SHEET (PDS) BEFORE ACCOM Seary, Indicate N/A if not applicable. DO NO				For CSC use one
I. PERSONAL INFORMA	TION	ssary, Indicate N/A if not applicable, DO NO	ABBRE VALUE	LVAC-10	200	
2 SURNAME	PILONGO					
FIRST NAME	JUPITER			NAME EXTE	INDION (JR., BR)	
MIDDLE NAME	GACUS					
3. DATE OF BIRTH				☐ Dual Citize	ashio	
(mm/dd/yyyy)	9/16/1988	16. CITIZENSHIP	② Filipino	-	torip □by natura	lization
4. PLACE OF BIRTH	CAGAYAN DE ORO CITY	If holder of dual citizenship,		The state of the s	dicate country	
5 GEX		please indicate the details	Philippines			-
Maria de la constitución de serán entra en	☑ Male ☐ Female	ENTRE LAND MARKETINE	P. Lambdon Serv		MA Roxas S	i.
B CIVIL STATUS	Single	17. RESIDENTIAL ADDRESS	House/Diock/Lot No.		POBLACIO	
The state of the s	Other/s:		Subdivision/Mlage	and the second	Barangay	ARTON AND DESCRIPTION OF THE PERSON
7. HEIGHT (m)	1.64	- Martin Control of the Control	MATALAM City/Municipality	- Park	NORTH COTAB Province	АТО
8. WEIGHT (kg)	65	ZIP CODE	MANUAL MA	9406		
9. BLOOD TYPE	o	16 PERMANENT ADDRESS	House/Black/Lot No	(10)	Purok Uno Street	
10. GSIS ID NO.	CRN-021-1580-8670-0	前側は15×31、15の4両の22回路 - 134を1911	PROUBB/BIOCACOT NO		KILADA	
	40 VIII VIII VIII VIII VIII VIII VIII VI	Children of Company of Man	Subdivision/Village MATALAM		NORTH COTA	BATO
AG-IBIG ID NO	NONE	PROTEIN CANADINA HE	City/Municipality	1973-10	Province	
12 PHILHEALTH NO.	17-025402652	ZIP CODE		9406		
13 SSS NO	NONE	19. TELEPHONE NO.		N/A 62334527		
14. TIN NO.	311-784-729	20 MOBILE NO		@usm.edu	nh	
15 AGENCY EMPLOYEE NO	12-02497	21 E-MAIL ADDRESS (if any)	jgpilongo	gusiii.egu	.PU	
II. FAMILY BACKGROUN		A MANUEL	CHILDREN (Write full name and I	ict all)	DATE OF BIR	TH (mm/dd/yyyy)
22. SPOUSE'S SURNAME	N/A	NAME EXTENSION (JR., SR)	N/A			
FIRST NAME		Substitutions	Service Control of the Control			
MIDDLE NAME						
OCCUPATION		The second secon				
EMPLOYER/BUSINESS NAME			and the second second second			
BUSINESS ADDRESS				Approximation and		
LEPHONE NO.		Alleren harman american				
24 FATHER'S SURNAME	PILONGO	NAME EXTENSION (JR., SR)				
FIRST NAME	ROMULO			House or which		
MIDDLE NAME	СОМРО					
25 MOTHER'S MAIDEN NAME				TOTAL SILE S		
SURNAME	GACUS		Manager State of the Control of the	displace with		
FIRST NAME	CORAZON				l .	
MIDDLE NAME	GALO		(Continue on sepa	au Grant Mass		
III. EDUCATIONAL BACK	GROUND			HIGHEST		SCHOLARSHIP/ ACADEMIC
26. LEVEL	NAME OF SCHOOL (Write in fulf)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE	UNITS	GRADUATED	HONORS RECEIVED
	100000000000000000000000000000000000000		From To 1995 2001	ELEMENTARY	2001	N/A
ELEMENTARY	SAGAY CENTRAL SCHOOL	PRIMARY EDUCATION		SECONDARY	2005	N/A
SECONDARY	ELIGAN CITY NATIONAL HIGH SCHOOL	HIGH SCHOOL	2001 2005	EDUCATION	- oveldright - o	N/A
VOCATIONAL / TRADE COURSE	NA WA	N/A		BACHELOR'S	200	
COLLEGE	MINDANAO STATE UNIVERSITY - LIGAN INSTITUTE OF TECHNOLOGY	26 MATHEMATICS	2005 2009	DEGREE	2009	N/A
GRADUATE STUDIES	MINDANAO STATE UNIVERSITY - ILIGAN INSTITUTE OF TECHNOLOGY	MS MATHEMATICS	2009 2011	MASTERAL	2011	DOST
GRADUATE STUDIES	UNIVERSITY OF THE PHILIPPINES . DILIMAN	Ph.D. MATHEMATICS	2016 PRESENT	DOCTORAL		CHED
	1	(Continue on asparate aheet if necessary)	DATE			
SIGNATURE	The same of the sa			ÇS F	ORM 212 (Revised 2	017), Page 1 of 4

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V CIVIL	SERVICE ELI	GIBILITY		The second section				ENSE C	
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From	1	(Write in fo	ull/Do not	DEPARTMENT (Write	「/AGENCY/OFFICE/COMPANY e in full/Do not abbreviate)	MONTHLY	PAY GRADE (fl applicable)& STEP	STATUS OF APPOINTMENT	SERVICE
01/09/2023	То	ASSIS	directly output by		and the second second second		(Format *00-0*)/ INCREMENT		(Y/N)
	PRESENT	PROFE	SSORI		UTHERN MINDANAO (DEPARTMENT OF MATH AND STAT)		SG15	PERMANENT	YES
07/01/2019	1/8/2023	INSTRUC	CTOR III	UNIVERSITY OF SOI	UTHERN MINDANAO (DEPARTMENT OF MATH AND STAT)	32,321	SG14	PERMANENT	YES
	06/30/2019	INSTRU	CTORI	2. 1. 1000000000000000000000000000000000	UTHERN MINDANAO (DEPARTMENT OF MATH AND STAT)	27,608	SG12	PERMANENT	YES
06/11/2012	9/8/2015	INSTRU	CTORI	UNIVERSITY OF SO	UTHERN MINDANAO (DEPARTMENT OF MATH AND STAT)	13,000	N/A	CONTRACT OF	N
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34	Are you related by consanguinity or affinity to the chief of bureau or office or to the person who has							
	Bureau or Department where you will be apppoint		4.0					
	a. within the third degree?		☐ YES ☑ NO					
	b. within the fourth degree (for Local Government Unit - Career Employees)?			☐ YES ☑ NO If YES, give details:				
35	a. Have you ever been found guilty of any administration		yes					
	b. Have you been criminally charged before any court?			☐ YES ☑ NO If YES, give details: Date Filed: Status of Case/s:				
36.	Have you ever been convicted of any crime or violation regulation by any court or tribunal?	n of any law, decree, ordinance or	☐ YE	S, give details:				
	Have you ever been separated from the service in any retirement, dropped from the rolls, dismissal, termination phased out (abolition) in the public or private sector?	FND OF CONTRACT						
38.	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: ☐ YES ☑ NO If YES, give details:				
	the last election to promote/actively campaign for a flaud	ilai di local carididate.	☐ YES					
	Have you acquired the status of an immigrant or permanent resident of another country?			ve details (country):				
10.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA	lagna Carta for Disabled Persons 8972), please answer the following	☐ YES	☑ NO				
	Are you a member of any indigenous group?		☐ YES ☑ NO If YES, please specify ID No:					
	e you a person with disability?		☐ YES ☑ NO If YES, please specify ID No:					
	Are you a solo parent?		If YES, Diease	Specify is				
	REFERENCES (Person not related by consanguinity or affinity to applican	it /appointee)	TEL. NO.					
1.	REFERENCES (Pason noctours)	ADDRESS USM,KABACAN,NORTH	93382453					
	PHILIP LESTER P. BENJAMIN, PhD	COTABATO USM,KABACAN,NORTH	91896513					
_	ENGR. ARNEL B. TOLEDO	COTABATO USM,KABACAN,NORTH	91075613					
_	PIMENTEL PhD	COTABATO	rue correct an	nd				
	JONALD L. PIMENTEL, PhD I declare under oath that I have personally accomplished the complete statement pursuant to the provisions of pertinent Philippines. I authorize the agency head/authorized represent agree that any misrepresentation made in this docume administrative/criminal case/s against me.	is Personal Data Checkers t laws, rules and regulations of the entative to verify/validate the conten- ent and its attachments shall cau	Republic of the stated hereing the filing of the filing of the filing of the filing of the state	JUPITER PILONGO				
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance								
Government Issued to: CRN-021-1580-8670-0 Signature (Sign inside the				Right Thumbmark				
- 1	te/Place of Issuance:	Date Accomplishe	1					
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