



Republic of the Philippines  
Department of the Interior and Local Government

Passport Size  
Photo

**BARANGAY OFFICIALS INFORMATION SHEET**  
2023-2025 Term of Office

**NOTE: PLEASE ACCOMPLISH THIS FORM AND WRITE LEGIBLY ALL THE INFORMATION REQUIRED IN CAPITAL LETTERS.**

REGION\* : \_\_\_\_\_ CITY/MUNICIPALITY\* : \_\_\_\_\_  
PROVINCE\* : \_\_\_\_\_ BARANGAY\* : \_\_\_\_\_

**ELECTIVE AND APPOINTEE POSITION**  
(Instruction: Check the acquired position)

DATE OF ASSUMPTION TO OFFICE/APPOINTMENT \* : \_\_\_\_\_ DATE OF ELECTION: October 30, 2023

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Punong Barangay   | <input type="checkbox"/> Barangay Treasurer | <input type="checkbox"/> BADAC Cluster Leader   |
| <input type="checkbox"/> Sangguniang Barangay Member<br><i>Encircle Rank (1, 2, 3, 4, 5, 6, 7)</i> | <input type="checkbox"/> Barangay Secretary | <input type="checkbox"/> Barangay Health Worker   |
| <input type="checkbox"/> SK Chairperson  | <input type="checkbox"/> SK Treasurer       | <input type="checkbox"/> Accredited/Registered by the Local Health Board                        |
| <input type="checkbox"/> SK Member <i>(Encircle Rank 1, 2, 3, 4, 5, 6, 7)</i>                      | <input type="checkbox"/> SK Secretary       | <input type="checkbox"/> Appointed by the Barangay (Barangay Health Aide/Health Care Assistant) |
| <input type="checkbox"/> IPMR  |   | <input type="checkbox"/> Barangay Nutrition Scholar   |
|  |   | <input type="checkbox"/> Barangay Tanod   |
|  |   | <input type="checkbox"/> Day Care Worker  |
|  |   | <input type="checkbox"/> Accredited per ECCD Council Resolution No. 15-03 dated Sept. 10, 2015  |
|  |   | <input type="checkbox"/> Lupon Member   |
|  |   | <input type="checkbox"/> VAW Desk Officer   |

**TERM IN THE PRESENT POSITION:**  
 1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>  Appointive/Replacement

If related with the Appointing Authority, please indicate the degree of consanguinity/affinity: \_\_\_\_\_

**PERSONAL AND POLITICAL INFORMATION**

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

(PhilSys Card No.)

\_\_\_\_\_  
(Last Name) \*                      (First Name) \*                      (Suffix e.g. Jr., II, III)                      (Middle Name) \*

\_\_\_\_\_  
(Birth Date: mm/dd/yyyy) \*                      (Birth Place) \*                      (Sex at Birth) \*                      (Civil Status) \*                      (Religion) \*

\_\_\_\_\_  
(Residence Address) \*                      (Contact Number) \*                      (Official E-mail Address)

\_\_\_\_\_  
(Barangay Hall Address) \*                      (Barangay Hall Contact Number) \*                      (Barangay E-mail Address)

HIGHEST EDUCATIONAL ATTAINMENT\*:  ELEMENTARY  HIGH SCHOOL  COLLEGE  POST GRAD  VOCATIONAL  
 Graduate \_\_\_\_\_  Under Graduate \_\_\_\_\_  
(Course)

OTHER OCCUPATION, IF ANY: \_\_\_\_\_ HONORARIUM AS BARANGAY OFFICIAL\*: \_\_\_\_\_  
 Private  Government

**BENEFICIARIES\*:** (for Punong Barangay, Sangguniang Barangay Member, SK Chairperson, IPMR, Barangay Secretary, and Barangay Treasurer only)

	NAME <i>(Last Name, First Name, Middle Initial)</i>	DATE OF BIRTH <i>(mm/dd/yyyy)</i>	RELATIONSHIP
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

(Please use additional sheet if necessary)

I hereby certify that the above information are true and correct to the best of my knowledge. I understand that for the DILG to carry out its mandate they must necessarily process my personal information. Therefore, I grant my consent and recognize the authority of the DILG to process my personal information, pursuant to the Philippine Data Privacy Act of 2012.

\_\_\_\_\_  
(Signature over Printed Name)

\_\_\_\_\_  
(Date Accomplished)

Verified and validated by:

---

*CD/CLGOO/MLGOO*  
*(Signature over Printed Name)*

---

*Date*