**RESEARCHER’S PROFILE FORM**

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| **I. RESEARCHER’S INFORMATION** | | | | | | |
| **Name of Researcher:** | | |  | | | |
| **Department/Office/College:** | | |  | | | |
| **Academic Rank:** | | |  | | | |
| **Position:** | | |  | | | |
| **Home Address:** | | |  | | | |
| **Email Address:** | | |  | | | |
| **Telephone No.:** | | |  | | | |
| **Mobile No.:** | | |  | | | |
| **Date of Birth:** | | |  | | | |
| **II. EDUCATIONAL BACKGROUND** | | | | | | |
| **DEGREE** | **COURSE** | | | | **MAJOR** | **SPECIALIZATION** |
| **Ph.D.** |  | | | |  |  |
| **MA / MS** |  | | | |  |  |
| **BS / AB** |  | | | |  |  |
| **Others** |  | | | |  |  |
| **III. Research Interest/s** | | | | | | |
| In what fields of expertise or competency are you willing to offer research services? Please cite according to your priority. | | | | | | |
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| \*\* Use a separate page if necessary. Attach certified true copies of all certificates and other supporting documents. | | | | | | |
| **IV. LIST OF RESEARCHES** | | | | | | |
| **TITLE OF RESEARCH** | | | **Area**  **of**  **Research** | **NATURE OF INVOLVEMENT**  **(if Project Leader/**  **Co-Researcher/etc.)** | **DATE STARTED** | **DATE COMPLETED** |
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| (Expand as needed for more researches) | | | | | | |
|  | | **V. LIST OF PUBLICATIONS** | | | | |
| **TITLE OF RESEARCH** | | | | **PUBLISHER** | **INDEXING** | |
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| (Expand as needed for more researches) | | | | | | |
| **VI. LIST OF PRESENTATIONS** | | | | | | |
| **TITLE OF RESEARCH** | | | **TITLE OF CONFERENCE** | **DATE & VENUE** | ***\*Indicate if:***  ***International, National, Regional*** | |
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| **V. LIST OF CITATIONS** | | | | | | |
| **TITLE OF RESEARCH** | | | | **CITING ARTICLE** | **DATE OF CITATION** | |
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| (Expand as needed for more researches) | | | | | | |
| **VII. CERTIFICATION AND PRIVACY STATEMENT** | | | | | | |
| *I hereby certify that the information given are true and correct.*  *The undersigned is/are fully aware that TSU-University Research Office may share and use information such as names, e-mail addresses, contact number, academic and employment information, and/or research data, for the purpose of fulfilling research undertakings including and limited to for connecting with me, processing of the form and its purpose. I also understand that when this official form, containing my personal information, is no longer needed for its purpose, proper disposal procedures based on university policies shall be done. I hereby allow TSU to collect, process, use and share my personal data contained hereof in the pursuit of its legitimate academic, research and extension purposes and/or interests as an educational institution.*  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_*  Signature over Printed Name Date  (Lead Researcher) | | | | | | |