

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.

1. CS ID No.

(Do not fill up. For CSC use only)

II. PERSONAL INFORMATION

2. SURNAME	FALQUEZA		
FIRST NAME	RICMEL		
MIDDLE NAME	SUMAGINGSING		
3. DATE OF BIRTH (mm/dd/yyyy)	11/20/1989	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.	<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	Odiongan, Romblon		
5. SEX	<input checked="" type="checkbox"/> Male <input 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 ZIP CODE	House/Block/Lot No. GUINO Subdivision/Village ODIONGAN City/Municipality ROMBLON Street MAYHA Barangay Province
7. HEIGHT (m)	1.6		
8. WEIGHT (kg)	68		
9. BLOOD TYPE	A	18. PERMANENT ADDRESS ZIP CODE	House/Block/Lot No. GUINO Subdivision/Village ODIONGAN City/Municipality ROMBLON Street MAYHA Barangay Province
10. GSIS ID NO.			
11. PAG-IBIG ID NO.			
12. PHILHEALTH NO.			5505
13. SSS NO.		19. TELEPHONE NO.	
14. TIN NO.	950-414-451	20. MOBILE NO.	09278637249
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	ricmelfalqueza@yahoo.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME	23. NAME of CHILDREN (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy)	
OCCUPATION					
EMPLOYER/BUSINESS NAME					
BUSINESS ADDRESS					
TELEPHONE NO.					
24. FATHER'S SURNAME FIRST NAME MIDDLE NAME	FALQUEZA				
	RICARDO	NAME EXTENSION (JR., SR)			
	FAJARITO				
25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME	SARSONA				
	FALQUEZA				
	MERLINDA				
	SARSONA				(Continue on separate sheet if necessary)

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	Mayha Elementary School		06/01/1997	05/05/2003	Elementary	2002	
SECONDARY	Odiongan National High School		06/05/2003	05/05/2007	Secondary	2007	Class 1st Honor
VOCATIONAL / TRADE COURSE	Rocafore Training Center	OAP NCII / ACP NCII	01/20/ 2020	02/20/2020			
COLLEGE	Romblon State University	BSIT/ BSED	06/20/ 2007	04/30/ 2013			
GRADUATE STUDIES	Romblon State University	MAED	08/07/1905		CAR		

(Continue on separate sheet if necessary)

SIGNATURE

DATE

11/15/2023

IV. CIVIL SERVICE ELIGIBILITY

(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.

(Continue on separate sheet if necessary)

SIGNATURE

[Signature]

DATE

11/15/2023

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION'S

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

(Continue on separate sheet if necessary)

SIGNATURE

Frank

DATE

11/15/2023

<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: <hr/>
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: <hr/> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: Date Filed: _____ Status of Case/s: _____
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: <hr/>
<p>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?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: <hr/>
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: <hr/> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: <hr/>
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details (country): <hr/>
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, please specify: <hr/> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: <hr/> <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please specify ID No: <hr/>

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

NAME	ADDRESS	TEL. NO.
Irene Fabellore	Batiano, Odiongan, Romblon	
Herman Marquez	Tabobo-an, Odiongan, Romblon	
Annaliza Fambabae	Anahao, Odiongan, Romblon	

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.



PHOTO

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	
Government Issued ID: TIN	
ID/License/Passport No.: 950-414-451	
Date/Place of Issuance:	

	
Signature (Sign inside the Box)	
Date Accomplished: 11/11/2013	

Right Thumbmark

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

Person Administering Oath
