

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 ☐es ( ) 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)

I. PERSONAL INFORMATION

2. SURNAME	CRUZ				
FIRST NAME	JUAN	NAME EXTENSION (JR., SR) N/A			
MIDDLE NAME	DELA				
3. DATE OF BIRTH (mm/dd/yyyy)	10-30-2023	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> birth <input type="checkbox"/> by naturalization Pls. indicate country:		
4. PLACE OF BIRTH	MAMBURAO	If holder of dual citizenship, please indicate the details.	N/A		
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	N/A LAGUNDIAN House/Block/Lot No. Street N/A BALANSAY Subdivision/Village Barangay MAMBURAO OCCIDENTAL MINDORO City/Municipality Province 5106		
7. HEIGHT (m)	173	18. PERMANENT ADDRESS	N/A LAGUNDIAN House/Block/Lot No. Street N/A BALANSAY Subdivision/Village Barangay MAMBURAO OCCIDENTAL MINDORO City/Municipality Province 5106		
8. WEIGHT (kg)	65		ZIP CODE	5106	
9. BLOOD TYPE	A		19. TELEPHONE NO.	09091246493	
10. GSIS ID NO.	N/A			20. MOBILE NO.	09091246492
11. PAG-IBIG ID NO.	N/A				21. E-MAIL ADDRESS (if any)
12. PHILHEALTH NO.	N/A				
13. SSS NO.	N/A				
14. TIN NO.	N/A				
15. AGENCY EMPLOYEE NO.	N/A				

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	N/A			
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	N/A			
25. MOTHER'S MAIDEN NAME	CRUZ			
SURNAME	DELA			
FIRST NAME	MAE			
MIDDLE NAME	NANG		(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/	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To	UNITS EARNED		
ELEMENTARY	CASOY ELEMENTARY SCHOOL		2004	2011	N/A	2011	N/A
SECONDARY	OCCIDENTAL MINDORO NATIONAL HIGH SCHOOL	N/A	2011	2017	N/A	2017	N/A
VOCATIONAL / TECHNICAL	N/A	N/A			N/A		
COLLEGE	OCCIDENTAL MINDORO STATE COLLEGE	INFORMATION TECHNOLOGY	2019	2023	N/A	2023	N/A
GRADUATE STUDIES	N/A	N/A	N/A		N/A	N/A	N/A

(Continue on separate sheet if necessary)

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

29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES		NUMBER OF HOURS	POSITION / NATURE OF WORK
	From	To		
N/A			N/A	N/A

(Continue on separate sheet if necessary)

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

(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)

30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
	From	To			
N/A			N/A	N/A	N/A

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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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, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?		<div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details: AAAA</div>	
35. a. Have you ever been found guilty of any administrative offense?  b. Have you been criminally charged before any court?		<div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details: DDD</div>	
		<div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: FFFF Status of Case/s: N/A</div>	
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details: GGG</div>	
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?		<div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details: HHH</div>	
38. 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?		<div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details: JJJ</div>	
		<div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details: ZZZZ</div>	
39. Have you acquired the status of an immigrant or permanent resident of another country?		<div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details (country): XXX</div>	
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: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?		<div><div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div><div>If YES, please specify: CCC</div><div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div><div>If YES, please specify ID No: VVV</div><div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div><div>If YES, please specify ID No: BBBB</div></div>	
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)			
NAME		ADDRESS	TEL. NO.
POY KALAMAY		BALANSAY	09091246493
JAKE DENVER MIDDLE NAME ALBER		ISON ST.	09067782016
JAKE		FATIMA, TAYAMAAN	09067782023
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.		<div><div><div>Government issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of</div><div>Government Issued ID:</div><div>ID/License/Passport No.:</div><div>Date/Place of Issuance:</div></div><div><div>Signature (Sign inside the box)</div><div>Date Accomplished</div></div><div><div>ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size)  With full and handwritten name tag and signature over printed name  Computer generated or photocopied picture is not acceptable</div><div>PHOTO</div></div><div><div></div><div>Right Thumbmark</div></div></div>	
SUBSCRIBED AND SWORN to before me this , affiant exhibiting his/her validly issued government ID as indicated above.			
<div></div> <div>Person Administering Oath</div>			