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.

concerned. READ THE ATTACHED GUIDE					i				
Print legibly. Tick appropriate boxes I. PERSONAL INFORM.		ecessary. Indicat	e N/A if not applicable. DO NO	T ABBREVIATE		1. CS ID No.	(Do r	not fill up. For	CSC use only
2. SURNAME	ATION								
FIRST NAME							NAME EXTENSION	I (JR., SR)	
MIDDLE NAME									
3. DATE OF BIRTH			16. CITIZENSHIP						
(mm/dd/yyyy)			16. CITIZENSHIP		Filipir	10	Dual Citizenship by birth	by naturali	zation
4. PLACE OF BIRTH			If holder of dual citizenship,					birth by naturalization indicate country:	
5. SEX	Male	Female	please indicate the	details.					
6 CIVIL STATUS	Single	Married	17. RESIDENTIAL ADDRESS						
O GIVIE GIATIOG	Widowed	Separated		Н	ouse/Block/l	Lot No.		Street	
	Other/s:				Subdivision	/Village		Barangay	
7. HEIGHT (m)				Cit	ty/Municipali	ity		Province	
8. WEIGHT (kg)			ZIP CODE						
9. BLOOD TYPE			18. PERMANENT ADDRESS	Н	louse/Block/	Lot No.		Street	
10. GSIS ID NO.					Subdivision/	Village		Barangay	
11. PAG-IBIG ID NO.				Ci	ty/Municipal	itv		Province	
12. PHILHEALTH NO.			ZIP CODE	<u> </u>	ty/Warneipan	ity		110011100	
13. SSS NO.			19. TELEPHONE NO.						
14. TIN NO.			20. MOBILE NO.						
15. AGENCY EMPLOYEE NO.			21. E-MAIL ADDRESS (if any)						
II. FAMILY BACKGRO	UND								
22. SPOUSE'S SURNAME				23. NAME of 0	CHILDREN	(Write full n	ame and list all)	DATE C	F BIRTH ld/yyyy)
FIRST NAME			NAME EXTENSION (JR., SR)					,	,,,,,
MIDDLE NAME									
OCCUPATION									
EMPLOYER/BUSINESS NAME									
BUSINESS ADDRESS									
TELEPHONE NO.									
24. FATHER'S SURNAME									
FIRST NAME			NAME EXTENSION (JR., SR)						
MIDDLE NAME									
25. MOTHER'S MAIDEN NAME									
SURNAME									
FIRST NAME									
MIDDLE NAME III. EDUCATIONAL BA	CKCBOLIND				(Contii	nue on sep	arate sheet if ned	essary)	_
					PERIO	DD OF	HIGHEST LEVEL/		SCHOLARSHI
26 LEVEL	NAME OF SCHOOL (Write in full)		BASIC EDUCATION/DEGF (Write in full)	ATTENDANGE			UNITS EARNED (if not graduated)	YEAR GRADUATED	
					From	То	, ,		RECEIVED
ELEMENTARY									
SECONDARY									
VOCATIONAL / TRADE COURSE									
COLLEGE									
GRADUATE STUDIES									
		(Cont	tinue on separate sheet if n	ecessary)			I	l	
SIGNATURE					DATE				

IV. CIVIL SERVICE ELIGIBILITY										
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE			RA 1080 (BOARD/ BAR)	RATING DATE OF (M. Applicable) EXAMINATION / PLACE OF EXAMINATION			TION / CONFEDMENT		LICENSE (if applicable)	
Е	UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	CONFERMENT	PLACE OF EXAMINA	I ION / CONF	ERIVIENT	NUMBER	Date of Validity	
V. W	ORK E	EXPERIEI	NCE	(Contin	ue on separate shee	et if necessary)				
			nt. Start from your recent	work) Description	of duties should be	indicated in the attached	Work Experi			
28. I	(mm/d	VE DATES ld/yyyy) To	POSITION T (Write in full/Do not					SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
FIC	orri	10						INCREMENT		
(Continue on separate sheet if necessary) SIGNATURE DATE										
S	IGNAT	URE					DATE			

VI.	VOLUNTARY WORK OR INVOLV	EMENT IN CIVIC / NON G	OVERNMEN	NT / PEOPL	.E / VOLU	NTARY ORG	GANIZATIO	N/S	
29.	NAME & ADDRESS OF C	NAME & ADDRESS OF ORGANIZATION INCLUSIVE DATES			NUMBER OF				
	(Write in ful		(mm/de	d/yyyy) To	HOURS		POSITION / NA	ATURE OF WORK	
			7.10						
VII	. LEARNING AND DEVELOPMEN		e on separate s			IDED	_	_	
	rt from the most recent L&D/training program						Executive/Mana	gerial positions)	
20			INCLUSIVE			Type of LD			
30.	TITLE OF LEARNING AND DEVELOPMEN PROGRAMS (Writ		ATTEN (mm/de		NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	CONI	OUCTED/ SPONSORED BY (Write in full)	
			From	То		recillical/etc)			
		(Continu	e on separate s	sheet if necess	ary)				
VIII	I. OTHER INFORMATION								
21	. SPECIAL SKILLS and HOBBIES	32. NON-ACA	DEMIC DISTING		GNITION		33. ASS	MEMBERSHIP IN SOCIATION/ORGANIZATION	
31.	. SPECIAL SMILLS AND HUBBIES	J2.	(Write i				33. AS	(Write in full)	
		(Continu	e on separate s	sheet if necess	ary)				
	SIGNATURE						DATE		

 Are you related by consanguinity or affinity to the appointing of of bureau or office or to the person who has immediate super Department where you will be apppointed, 	• • • • • • • • • • • • • • • • • • • •					
a. within the third degree? b. within the fourth degree (for Local Government Unit		NO NO rails:				
35. a. Have you ever been found guilty of any administration	ve offense?	YES If YES, give det	NO cails:			
b. Have you been criminally charged before any court?		NO sails: ate Filed: f 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	YES NO If YES, give details:				
37. 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?		YES NO If YES, give details:				
(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?					
39. Have you acquired the status of an immigrant or perma	YES NO If YES, give details (country):					
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magrand (c) Solo Parents Welfare Act of 2000 (RA 8972), please a	,					
a Are you a member of any indigenous group?	Are you a member of any indigenous group?					
b Are you a person with disability?	Are you a person with disability?					
c. Are you a solo parent?	Are you a solo parent?					
41. REFERENCES (Person not related by consanguinity or affinit	ty to applicant /appointee)					
NAME	ADDRESS	TEL. NO.	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			
42. I declare under oath that I have personally accomplished and complete statement pursuant to the provisions of puthe Philippines. I authorize the agency head / authorize herein. I agree that any misrepresentation made in this of administrative/criminal case/s against me.	pertinent laws, rules and regulations o ed representative to verify/validate the	f the Republic of contents stated	Computer generated or photocopied picture is not acceptable 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:						
ID/License/Passport No.:	Signature (Sign inside the	box)				
Date/Place of Issuance:	Date Accomplished		Right Thumbmark			
SUBSCRIBED AND SWORN to before me this	, a indicated above.	ffiant exhibiting his/he	er validly issued government ID as			
	ath					