

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)

I. PERSONAL INFORMATION

2. SURNAME					
	FIRST NAME		NAME EXTENSION (JR., SR)		
	MIDDLE NAME				
3. DATE OF BIRTH (mm/dd/yyyy)		16. CITIZENSHIP  If holder of dual citizenship, please indicate the details.	Filipino	Dual Citizenship by birth by naturalization	
4. PLACE OF BIRTH			Pls. indicate country:		
5. SEX	MaleFemale				
6 CIVIL STATUS	Single	Married	17. RESIDENTIAL ADDRESS		
	Widowed	Separated		House/Block/Lot No. Street	
	Other/s:			Subdivision/Village Barangay	
7. HEIGHT (m)			ZIP CODE	City/Municipality Province	
8. WEIGHT (kg)					
9. BLOOD TYPE					
10. GSIS ID NO.			18. PERMANENT ADDRESS	House/Block/Lot No. Street	
11. PAG-IBIG ID NO.				Subdivision/Village Barangay	
12. PHILHEALTH NO.				City/Municipality Province	
13. SSS NO.			19. TELEPHONE NO.		
14. TIN NO.				20. MOBILE NO.	
15. AGENCY EMPLOYEE NO.				21. E-MAIL ADDRESS (if any)	

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/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		(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							
	SECONDARY							
	VOCATIONAL / TRADE COURSE							
	COLLEGE							
	GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE		
-----------	--	------	--	--

IV. CIVIL SERVICE ELIGIBILITY					
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
				NUMBER	Date of Validity

(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.							
28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
From	To						

(Continue on separate sheet if necessary)

SIGNATURE		DATE		
-----------	--	------	--	--

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

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

(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 (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)

(Continue on separate sheet if necessary)

SIGNATURE		DATE		
-----------	--	------	--	--

