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 Thint legibly. Tick appropriate boxes							1. CS ID No.	(Do r	not fill up. For	CSC use only)
I. PERSONAL INFORM		necessary. muicat	e N/A II Hot app	ilicable. DO NO	I ABBREVIATE		1. C3 ID No.	(501	iot iiii up. i oi	ooo use only)
2. SURNAME										
FIRST NAME								NAME EXTENSION	I (JR., SR)	
MIDDLE NAME										
3. DATE OF BIRTH (mm/dd/yyyy)			16. CITIZENSI	HIP		Filipi	no	Dual Citizenship	h	
4. PLACE OF BIRTH			If hold	er of dual citize	enship,			by birth Pls. indicate	by naturali e country:	ization
5. SEX	Male	Female	pleas	e indicate the o	details.					
6 CIVIL STATUS	Single Widowed Other/s:	Married Separated	17. RESIDENT	TIAL ADDRESS	House/Block/Lot No.			Street		
7. HEIGHT (m)			_			division/Villa			Barangay	
8. WEIGHT (kg)			ZIP (CODE	City	//Municipalit	У		Province	
9. BLOOD TYPE			18. PERMANE	NT ADDRESS	Hous	e/Block/Lot i	No		Street	
10. GSIS ID NO.			-			division/Villa			Barangay	
11. PAG-IBIG ID NO.						//Municipalit			Province	
12. PHILHEALTH NO.			ZIP (CODE	City	<i>//Минісіран</i> і	у		Province	
13. SSS NO.			19. TELEPHON	NE NO.						
14. TIN NO.			20. MOBILE N	O.						
15. AGENCY EMPLOYEE NO.			21. E-MAIL AD	DDRESS (if any)						
II. FAMILY BACKGRO	UND									
22. SPOUSE'S SURNAME					23. NAME of 0	CHILDREN	(Write full n	ame and list all)	DATE C (mm/c	OF BIRTH dd/yyyy)
FIRST NAME			NAME EXTEN	ISION (JR., SR)						
MIDDLE NAME										
OCCUPATION										
EMPLOYER/BUSINESS NAME										
BUSINESS ADDRESS										
TELEPHONE NO.										
24. FATHER'S SURNAME										
			NAME EXTEN	ISION (JR., SR)						
FIRST NAME										
MIDDLE NAME										
25. MOTHER'S MAIDEN NAME										
SURNAME										
FIRST NAME										
MIDDLE NAME						(Conti	nue on sep	arate sheet if ned	essary)	
III. EDUCATIONAL BA	CKGROUND									
26 LEVEL	NAME OF SCH (Write in full		BASIC EDU	CATION/DEGR (Write in full)	EE/COURSE		OD OF DANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHI P/ ACADEMIC HONORS RECEIVED
ELEMENTARY										
SECONDARY										
VOCATIONAL / TRADE COURSE										
COLLEGE										
GRADUATE STUDIES										
		(Con	tinue on sepa	rate sheet if ne	ecessary)					
SIGNATURE				DATE						

IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) RATING			DATE OF		LICENSE (if applicable)				
UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONF	ERMENT	NUMBER	Date of Validity	
									,
			(0.11)						
V. WOF	RK EXPERIE	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 Exper	ience sheet.		T
28. INCI	.USIVE DATES mm/dd/yyyy)		POSITION TITLE		DEPARTMENT / AGENCY / OFFICE / COMPANY			STATUS OF	GOV'T SERVICE
From	То	(Write in full/Do not	t abbreviate)	(Write in full/	MONTHLY applicable)& SALARY STEP (Format "00-0")/ INCREMENT		APPOINTMENT	(Y/N)	
							INOREMENT		
						<u>L</u> _			
			(0	Wo on somewaters!	at if page age :: 1				
SIG	NATURE.		(Contin	ue on separate shee	t π necessary)		I		
SIGNATURE									

VI. V	OLUNTARY WORK OR INVOLV	EMENT IN CIVIC / NON G	OVERNMEI	NT / PEOPL	E / VOLU	NTARY ORG	GANIZATION/S	
29.	NAME & ADDRESS OF C	ME & ADDRESS OF ORGANIZATION INCLUSIVE DATES						
20.	(Write in ful		(mm/d From	d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
			FIOIII	10				
		(Continu	le on separate s	sheet if necess	ary)			
	LEARNING AND DEVELOPMEN							
(Start	from the most recent L&D/training program	and include only the relevant L&D			e (5) years fol	r Division Chief/L	Executive/Managerial positions)	
30.	TITLE OF LEARNING AND DEVELOPMEN			DANCE	NUMBER OF	Type of LD (Managerial/	CONDUCTED/ SPONSORED BY	
	PROGRAMS (Wri	te in full)	(mm/d From	d/уууу) То	HOURS	Supervisory/ Technical/etc)	(Write in full)	
			110111	10				
		(Continu	le on separate s	sheet if necess	ary)			
VIII.	OTHER INFORMATION							
31.	SPECIAL SKILLS and HOBBIES	32. NON-ACA	DEMIC DISTING		OGNITION		MEMBERSHIP IN 33. ASSOCIATION/ORGANIZATION	
			(Write	iri Tull)			(Write in full)	
		(Continu	e on separate s		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?	YES NO				
b. within the fourth degree (for Local Government Unit	b. within the fourth degree (for Local Government Unit - Career Employees)?				
		If YES, give det	tails:		
35. a. Have you ever been found guilty of any administrativ	re offense?	VEC	NO		
35. di Fiaro you ovoi bosificana gamy oi any administrativ	o ononco.	YES If YES, give det	NO tails:		
b. Have you been criminally charged before any court?		YES	NO		
2. Have you seen ominimally charged select any court.		If YES, give det			
			ate Filed:		
		Status o	f Case/s:		
36. Have you ever been convicted of any crime or violation regulation by any court or tribunal?	of any law, decree, ordinance or	YES	NO		
, ,		If YES, give det	tails:		
37. Have you ever been separated from the service in any	of the following modes: resignation				
retirement, dropped from the rolls, dismissal, termination		YES NO If YES, give details:			
phased out (abolition) in the public or private sector?					
38. a. Have you ever been a candidate in a national or loca (except Barangay election)?	al election held within the last year	YES	NO		
(except barangay election):		If YES, give details:			
 Have you resigned from the government service during the election to promote/actively campaign for a national or local or 		YES	NO		
		If YES, give details:			
39. Have you acquired the status of an immigrant or perma	inent resident of another country?	YES	NO		
		If YES, give det	talls (country):		
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magr	a Carta for Disabled Persons (RA 7277);				
and (c) Solo Parents Welfare Act of 2000 (RA 8972), please a	answer the following items:				
a Are you a member of any indigenous group?		YES	NO aif		
b Are you a person with disability?		If YES, please spe	NO NO		
,		If YES, please spe			
c. Are you a solo parent?		YES	NO		
		If YES, please spe	city ID No:		
41. REFERENCES (Person not related by consanguinity or affinit	y 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 de clare un der ooth that I have norsenally accomplish	ad this Darsanal Data Chast which is	- twis	Computer generated		
42. I declare under oath that I have personally accomplishe and complete statement pursuant to the provisions of p	ertinent laws, rules and regulations o	f the Republic of	or photocopied picture is not acceptable		
the Philippines. I authorize the agency head / authorize herein. I agree that any misrepresentation made in this			PUOTO		
of administrative/criminal case/s against me.		J	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		ffiant exhibiting his/he	er validly issued government ID as		
-	indicated above.				
	ath				
	Person Administering Oa				