

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 ( ☐ nd 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	JACINTO		
FIRST NAME	ALJOHN	NAME EXTENSION (JR., SR)	
MIDDLE NAME	P		
3. DATE OF BIRTH (mm/dd/yyyy)	11/27/1997	16. CITIZENSHIP	<div><input checked="" type="checkbox"/> Filipino <input checked="" type="checkbox"/> Dual Citizenship</div> <div><input checked="" type="checkbox"/> by birth <input checked="" type="checkbox"/> by naturalization</div> <div>Pls. indicate country:</div> <div>Albania</div>
4. PLACE OF BIRTH	Manaoag, Pangasinan		
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6 CIVIL STATUS	<div><input checked="" type="checkbox"/> Single <input type="checkbox"/> Married</div> <div><input type="checkbox"/> Widowed <input type="checkbox"/> Separated</div> <div><input type="checkbox"/> Other/s:</div>	17. RESIDENTIAL ADDRES	283 N/A
7. HEIGHT (m)	175		House/Block/Lot No. Street
8. WEIGHT (kg)	70		N/A INAMOTAN
9. BLOOD TYPE	Z		Subdivision/Village Barangay
10. GSIS ID NO.	N/A	MANAOAG PANGASINAN	City/Municipality Province
11. PAG-IBIG ID NO.	121267877859	18. PERMANENT ADDRES	283 N/A
12. PHILHEALTH NO.	52515150617		House/Block/Lot No. Street
13. SSS NO.	3492285207		N/A INAMOTAN
14. TIN NO.	363716309		Subdivision/Village Barangay
15. AGENCY EMPLOYEE NO.	493885	MANAOAG PANGASINAN	City/Municipality Province
		19. TELEPHONE NO.	092777905922
		20. MOBILE NO.	9277790592
		21. E-MAIL ADDRESS (if any)	aljohnjacinto.aj@gmail.com

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	N/A	N/A
MIDDLE NAME	N/A		Child 3	3/2/2022
OCCUPATION	N/A		Chd 4	3/6/2022
EMPLOYER/BUSINESS NAME	N/A		Chd1	3/6/2022
BUSINESS ADDRESS	N/A		Child 9	3/6/2022
TELEPHONE NO.	N/A		Child 10	3/6/2022
24. FATHER'S SURNAME	JACINTO		Child 11	3/6/2022
FIRST NAME	ALEX	NAME EXTENSION (JR., SR) N/A	Child 12	3/6/2022
MIDDLE NAME	LUCAS		Child 13	3/6/2022
25. MOTHER'S MAIDEN NAME			Chd 6	3/6/2022
SURNAME	JACINTO		Child 2	3/9/2022
FIRST NAME	MARISSA		Chd 5	3/10/2022
MIDDLE NAME	PEÑAFLO		Child 8	

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	INAMOTAN ELEMENTARY SCHOOL	ELEMENTARY	03/01/2004	03/01/2010	GRADUATED	2010	N/A
SECONDARY	URDANETA CITY NATIONAL HIGH SCHOOL	HIGH SCHOOL	01/01/2010	01/01/2014	GRADUATED	2014	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

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
N/A	N/A	N/A	N/A	N/A	N/A

(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)
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE		CS FORM 212 (Revised 2017), Page 2 of 4
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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 (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
N/A		N/A	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 (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	Fostering Resilience During the COVID-19 Pandemic - Mindfulness and Compassion Training	02/23/2022	02/23/20	8	ASDASD	PANGASINAN IMO

(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)
	PLAYING		N/A		N/A

(Continue on separate sheet if necessary)

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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>		
35. a. Have you ever been found guilty of any administrative offense?        b. Have you been criminally charged before any court?			<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>		
			<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>		
			<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>		
39. Have you acquired the status of an immigrant or permanent resident of another country?			<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</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><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>		
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)					
NAME		ADDRESS		TEL. NO.	
BRIAN B. LAPITAN		URDANETA CITY		09273881415	
KRISTEN B. SALVIO		BINALONAN		09224319023	
ROWENA RUTH		BAGUIO CITY		09171554017	
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>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</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></div> <div>Date Accomplished</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>Right Thumbmark</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>					

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