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 PE	RSONAL DATA SH	EET (PDS) BEFORE ACCOM	IPLISHING TH	IE PDS FOR	M.			
Print legibly. Tick appropriate boxes		et if necessary. Indicat	e N/A if not applicable. DO NO	T ABBREVIATE	≣.	1. CS ID No.	(Do r	not fill up. For	CSC use only
I. PERSONAL INFORM	ATION								
2. SURNAME									
FIRST NAME	NAME EXTENSION					NAME EXTENSION	I (JR., SR)		
MIDDLE NAME									
3. DATE OF BIRTH (mm/dd/yyyy)			16. CITIZENSHIP		Filipino Dual Citizenshi by birth			p by naturalization	
4. PLACE OF BIRTH			If holder of dual citize	enship,			Pls. indicate	e country:	
5. SEX	Male	Female	please indicate the	details.					
6 CIVIL STATUS	Single	Married	17. RESIDENTIAL ADDRESS						
	Widowed Other/s:	Separated		Hous	e/Block/Lot N	Vo.		Street	
7 LIEIQUE ()	outer/s.		-	Subo	division/Villag	ge		Barangay	
7. HEIGHT (m)			4	City	//Municipality	/		Province	
8. WEIGHT (kg)			ZIP CODE						
9. BLOOD TYPE			18. PERMANENT ADDRESS	Hous	e/Block/Lot N	Vo.		Street	
10. GSIS ID NO.				Subo	division/Villag	ge		Barangay	
11. PAG-IBIG ID NO.				City	//Municipality	/		Province	
12. PHILHEALTH NO.			ZIP CODE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
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 (mm/c	OF BIRTH 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					(Contin	nue on sep	arate sheet if ned	cessary)	
III. EDUCATIONAL BA	CKGROUND								
26 LEVEL	NAME OF S (Write in		BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIO ATTENI From		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 separate sheet if n	ecessary)					
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 (If 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	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		DEPARTMENT CO (Write in full)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)	
FIC	orri	10						INCREMENT		
				(Contin	ue on separate shee	et if necessary)				
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 O		PRGANIZATION	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF		20070044		
	(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?	YES NO				
b. within the fourth degree (for Local Government Unit		NO			
		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 If YES, give det	NO tails:		
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 If YES, please spe	NO aif		
b Are you a person with disability?	Are you a person with disability?				
,		YES If YES, please spe	NO cify ID No:		
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				