

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	LABANGCOC		
FIRST NAME	ALLYSA MARIE		NAME EXTENSION (JR., SR.) N/A
MIDDLE NAME	POMPA		
3 DATE OF BIRTH (mm/dd/yyyy)	05/03/1999	16 CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country
4 PLACE OF BIRTH	DINGRAS, ILOCOS NORTE	If holder of dual citizenship, please indicate the details	Philippines
5 SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17 RESIDENTIAL ADDRESS	PUROK 3 Street SALCEDO Barangay TARLAC Province
7 HEIGHT (m)	160	House/Block/Lot No.	
8 WEIGHT (kg)	65	Subdivision/Village	
9 BLOOD TYPE	O	SAN MANUEL City/Municipality	2309
10 GSIS ID NO.	N/A	18 PERMANENT ADDRESS	005 House/Block/Lot No.
11 PAG-IBIG ID NO.	121275069052	Subdivision/Village	SITIO NATUNUNG Street CALI Barangay
12 PHILHEALTH NO.	052500853328	DINGRAS City/Municipality	ILOCOS NORTE Province
13 SSS NO.	N/A	19 TELEPHONE NO.	
14 TIN NO.	767-341-418	20 MOBILE NO.	09453727206
15 AGENCY EMPLOYEE NO.	356324	21 E-MAIL ADDRESS (if any)	allysamanelabangcoc@yahoo.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	
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24 FATHER'S SURNAME	LABANGCOC			
FIRST NAME	GERARDO	NAME EXTENSION (JR., SR.) N/A		
MIDDLE NAME	SALVADOR			
25 MOTHER'S MAIDEN NAME				
SURNAME	POMPA			
FIRST NAME	MARY CRESENCIA			
MIDDLE NAME	SAPADEN			

(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	SALUDAES-CALI ELEMENTARY SCHOOL	PRIMARY EDUCATION	2005	2011	N/A	2011	N/A
SECONDARY	SAINT JOSEPH INSTITUTE OF DINGRAS INC.	SECONDARY EDUCATION	2011	2015	N/A	2015	N/A
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	NORTHWESTERN UNIVERSITY	BACHELOR OF SCIENCE IN CRIMINOLOGY	2015	2019	N/A	2019	N/A
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)


SIGNATURE		DATE	03/15/2024
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[illegible]

V. WORK EXPERIENCE

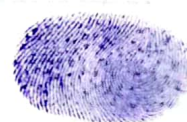
[illegible]

SIGNATURE	<i>Adam J. ...</i>	DATE	03/15/2024
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<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>Status of Case/s: _____</p>												
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>												
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>												
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>TEDDY ROSQUETA</td> <td>BRGY CALI, DINGRAS, ILOCOS NORTE</td> <td></td> </tr> <tr> <td>MARILYN BALINBIN</td> <td>BRGY CALI, DINGRAS, ILOCOS NORTE</td> <td></td> </tr> <tr> <td>JONEL COSTALES</td> <td>BRGY SALCEDO, SAN MANUEL, TARLAC</td> <td></td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	TEDDY ROSQUETA	BRGY CALI, DINGRAS, ILOCOS NORTE		MARILYN BALINBIN	BRGY CALI, DINGRAS, ILOCOS NORTE		JONEL COSTALES	BRGY SALCEDO, SAN MANUEL, TARLAC	
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<p>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.</p>													
<p>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: PNP</p> <p>ID/License/Passport No.: 21K2400009</p> <p>Date/Place of Issuance: CAMP CRAME QUEZON CITY</p>	<p></p> <p>Signature (Sign inside the box)</p> <p>03/15/2024</p> <p>Date Accomplished</p>												
<p style="text-align: center;">SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; width: 300px; height: 60px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>													



PHOTO



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