

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	Gonzales		
FIRST NAME	Mark Anthony		NAME EXTENSION (JR., SR)
MIDDLE NAME	Lopez		
3. DATE OF BIRTH (mm/dd/yyyy)	3/15/1995	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	Quezon City Philippines	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6 CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:		
7. HEIGHT (m)	170cm	17. RESIDENTIAL ADDRESS	123 Mabuhay Street House/Block/Lot No. Street GreenField Subdivision Barangay Central Subdivision/Village Barangay Quezon City Metro Manila City/Municipality Province
8. WEIGHT (kg)	70kg	ZIP CODE	
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	123 Mabuhay Street House/Block/Lot No. Street GreenField Subdivision Barangay Central Subdivision/Village Barangay Quezon City Metro Manila City/Municipality Province
10. GSIS ID NO.	123456789	ZIP CODE	1101
11. PAG-IBIG ID NO.	987654321	19. TELEPHONE NO.	(02) 987-6543
12. PHILHEALTH NO.	321654987	20. MOBILE NO.	0917-123-4567
13. SSS NO.	111-222-3333	21. E-MAIL ADDRESS (if any)	markk323@gmail.com
14. TIN NO.	123-456-789		
15. AGENCY EMPLOYEE NO.	202405678		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Garcia		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Ana	NAME EXTENSION (JR., SR)	Maria Ana Dela Cruz	12/5/2010
MIDDLE NAME	Cruz		Jose Pedro Dela Cruz	09/08/2013
OCCUPATION	Teacher		Juan Carlos Dela Cruz	01/18/2016
EMPLOYER/BUSINESS NAME	Department of Education			
BUSINESS ADDRESS	Quezon City, Metro Manila			
TELEPHONE NO.	(02) 998-7654			
24. FATHER'S SURNAME	Dela Cruz			
FIRST NAME	Pedro	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Santos			
25. MOTHER'S MAIDEN NAME				
SURNAME	Cruz			
FIRST NAME	Maria			
MIDDLE NAME	Lopez		(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	Quezon City Elementary School	Elementary Education	1/7/1991	1/3/1997	Completed	1997	N/A
SECONDARY	Quezon City High School	High School Education	1/7/1997	1/3/2001	Completed	2001	with honors
VOCATIONAL /	Tesda Training Center	AutomotiveS Servicing NC II	1/7/2005	1/3/2006	Completed	2006	N/A
COLLEGE	University of the Philippines,Dillman	Bachelor of Science in Computer Science	1/7/2001	1/3/2005	Completed	2005	N/A
GRADUATE STUDIES	Polytechnic University of the Philippines	Ph.D Computer Science	1/7/2008	1/3/2010	Completed	2010	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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[illegible]

V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

<i>SIGNATURE</i>		<i>DATE</i>	
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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			
Philippine Red Cross, Quezon City	1/1/2015	Present	100 hrs/year	Volunteer	
Gawad Kalinga, Manila	1/6/2018	1/12/2020	50 hrs/year	Volunteer Coordinator	
Habitat for Humanity, Quezon City	1/3/2013	1/5/2015	75 hrs/year	Volunteer Builder	
(Continue on separate sheet if necessary)					
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED					
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			
Advanced Web Development	06/15/2022	06/30/2022	40 hours	Tech Academy PH	Technical
Leadership and Management Training	5/3/2021	7/3/2021	24 hours	Philippine Management Institute	Managerial
Project Management For IT Professionals	10/9/2020	09/14/2020	32 hours	Project Management Institute	Supervisory
Data Science And Analytics Workshop	01/20/2020	01/22/2020	24 hours	National IT Society	Technical
(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)		
Financial reporting and analysis	Employee of the Year (2019)				
(Continue on separate sheet if necessary)					
SIGNATURE				DATE	

<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 type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input 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 type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <hr/> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">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 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 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 type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input 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 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 type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input 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: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.									
NAME	ADDRESS	TEL. NO.											
<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>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"> <small>GOVERNMENT ISSUED ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</small> PLEASE INDICATE ID Number and Date of Issuance </td> </tr> <tr> <td>Government Issued ID:</td> </tr> <tr> <td>ID/License/Passport No.:</td> </tr> <tr> <td>Date/Place of Issuance:</td> </tr> </table>	<small>GOVERNMENT ISSUED ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</small> PLEASE INDICATE ID Number and Date of Issuance	Government Issued ID:	ID/License/Passport No.:	Date/Place of Issuance:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 100px; vertical-align: bottom; text-align: center;"> Signature (Sign inside the box) </td> </tr> <tr> <td style="text-align: center;"> Date Accomplished </td> </tr> </table>	Signature (Sign inside the box)	Date Accomplished						
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<div style="border: 1px solid black; width: 150px; height: 100px; margin: 0 auto; text-align: center; padding-top: 50px;"> Right Thumbmark </div>													
<p>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; text-align: center; padding-top: 5px;"> Person Administering Oath </div>													