

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	ANTIOQUIA		
FIRST NAME	JOHN MANUEL	NAME EXTENSION (JR., SR)	
MIDDLE NAME	MIASE		
3. DATE OF BIRTH (mm/dd/yyyy)	3/27/2001	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	BINANGONAN, RIZAL	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input 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:		
7. HEIGHT (m)	160	17. RESIDENTIAL ADDRESS	89 SAN FRANCISCO ST. House/Block/Lot No. Street POBLACION Subdivision/Village Barangay SAN FRANCISCO QUEZON City/Municipality Province
8. WEIGHT (kg)	50	ZIP CODE	4315
9. BLOOD TYPE	O+	18. PERMANENT ADDRESS	89 SAN FRANCISCO ST. House/Block/Lot No. Street POBLACION Subdivision/Village Barangay SAN FRANCISCO QUEZON City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	4315
11. PAG-IBIG ID NO.	N/A	19. TELEPHONE NO.	N/A
12. PHILHEALTH NO.	N/A	20. MOBILE NO.	09154087327
13. SSS NO.	N/A	21. E-MAIL ADDRESS (if any)	
14. TIN NO.	N/A		
15. AGENCY EMPLOYEE NO.	N/A		

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	ANTIOQUIA			10/30/1983
FIRST NAME	ANDRES	NAME EXTENSION (JR., SR)		
MIDDLE NAME	MACARAEG			
25. MOTHER'S MAIDEN NAME				
SURNAME	MIASE			4/13/1984
FIRST NAME	JENNIFER			
MIDDLE NAME	LIZERTIGUEZ		(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	PILA-PILA ELEMENTARY SCHOOL	GRADE 1-6	2007	2013	N/A	2013	N/A
SECONDARY	SAN FRANCISCO PAROCHIAL ACADEMY INC.	HIGH SCHOOL/SENIOR HIGH SCHOOL	2013	2019	N/A	2019	N/A
VOCATIONAL /	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	POLYTECHNIC UNIVERSITY OF THE PHILIPPINES MULANAY QUEZON BRANCH	DIPLOMA IN INFORMATION COMMUNICATION TECHNOLOGY	7/12/1905	PRESENT	N/A	N/A	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

SIGNATURE		DATE	May 3, 2023
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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]

SIGNATURE		DATE	MAY 3, 2023
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

[illegible][illegible]

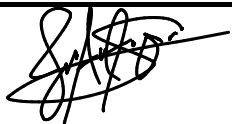
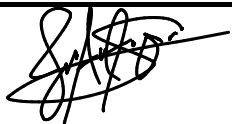
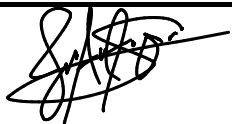

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
COMPUTER PROGRAMMING	N/A	N/A
WEB DEVELOPMENT		
WORD PROCESSING		
COMPUTER LITERATE		
ANDROID APP DEVELOPMENT		
PHOTO EDITING		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	MAY 3, 2023
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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>HON. FRANCO T. AGUILA</td> <td>SAN FRANCISCO QUEZON</td> <td>N/A</td> </tr> <tr> <td>DR. KIM BARIATA</td> <td>SAN FRANCISCO QUEZON</td> <td>N/A</td> </tr> <tr> <td>DALMAFID OJASTRO</td> <td>SAN FRANCISCO QUEZON</td> <td>N/A</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	HON. FRANCO T. AGUILA	SAN FRANCISCO QUEZON	N/A	DR. KIM BARIATA	SAN FRANCISCO QUEZON	N/A	DALMAFID OJASTRO	SAN FRANCISCO QUEZON	N/A
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DALMAFID OJASTRO	SAN FRANCISCO QUEZON	N/A											
<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.)</p> <p>PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: DRIVERSE LISCENSE</p> <p>ID/License/Passport No.: D45-22-300618</p> <p>Date/Place of Issuance: 10/06/2022</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; height: 100px;">  Signature (Sign inside the box) 05/03/2023 Date Accomplished </td> <td style="width: 20%; vertical-align: top;"> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> ID picture taken within the last 6 months 4.5 cm. X 3.5 cm (passport size) </div> <div style="border: 1px solid black; padding: 5px;"> Computer generated or photocopied picture is not acceptable </div> </td> </tr> </table>	 Signature (Sign inside the box) 05/03/2023 Date Accomplished	<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> ID picture taken within the last 6 months 4.5 cm. X 3.5 cm (passport size) </div> <div style="border: 1px solid black; padding: 5px;"> Computer generated or photocopied picture is not acceptable </div>										
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<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: 80px; margin: 10px auto; text-align: center;">  Person Administering Oath </div>													