

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				
FIRST NAME			NAME EXTENSION (JR., SR)	
MIDDLE NAME				
3. DATE OF BIRTH (mm/dd/yyyy)	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.			
4. PLACE OF BIRTH				
5. SEX	<input type="checkbox"/> Male	<input type="checkbox"/> Female		
6 CIVIL STATUS	<input type="checkbox"/> Single	<input type="checkbox"/> Married	17. RESIDENTIAL ADDRESS House/Block/Lot No. _____ Street _____ Subdivision/Village _____ Barangay _____ City/Municipality _____ Province _____ ZIP CODE	
	<input type="checkbox"/> Widowed	<input type="checkbox"/> Separated		
	<input type="checkbox"/> Other/s:			
7. HEIGHT (m)				
8. WEIGHT (kg)				
9. BLOOD TYPE	18. PERMANENT ADDRESS House/Block/Lot No. _____ Street _____ Subdivision/Village _____ Barangay _____ City/Municipality _____ Province _____ ZIP CODE			
10. GSIS ID NO.				
11. PAG-IBIG ID NO.				
12. PHILHEALTH NO.				
13. SSS NO.	19. TELEPHONE NO.			
14. TIN NO.				
15. AGENCY EMPLOYEE NO.	20. MOBILE NO. 21. E-MAIL ADDRESS (if any)			

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/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	<i>(Continue on separate sheet if necessary)</i>			

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							
SECONDARY							
VOCATIONAL / TRADE COURSE							
COLLEGE							
GRADUATE STUDIES							
<i>(Continue on separate sheet if necessary)</i>							
SIGNATURE				DATE			

IV. CIVIL SERVICE ELIGIBILITY

(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.

(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> <ol style="list-style-type: none"> within the third degree? within the fourth degree (for Local Government Unit - Career Employees)? 	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: <hr/>												
<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>	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: <hr/> <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: Date Filed: _____ Status of Case/s: _____												
<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>	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: <hr/>												
<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>	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: <hr/>												
<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>	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: <hr/> <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: <hr/>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details (country): <hr/>												
<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> <ol style="list-style-type: none"> Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent? 	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please specify: <hr/> <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please specify ID No.: <hr/> <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please specify ID No.: <hr/>												
<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="text-align: center; padding: 2px;">NAME</th> <th style="text-align: center; padding: 2px;">ADDRESS</th> <th style="text-align: center; padding: 2px;">TEL. NO.</th> </tr> </thead> <tbody> <tr><td style="height: 20px;"></td><td></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td><td></td></tr> </tbody> </table> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>ID picture taken within the last 6 months 4.5 cm. X 3.5 cm (passport size)</p> <p>Computer generated or photocopied picture is not acceptable</p> </div>	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>	<div style="text-align: center; margin-bottom: 10px;"> PHOTO </div> <div style="border: 1px solid black; width: 100%; height: 100px; margin-bottom: 10px;"></div>												
<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:</p> <p>ID/License/Passport No.:</p> <p>Date/Place of Issuance:</p>	<div style="border: 1px solid black; width: 100%; height: 100px; margin-bottom: 10px;"></div> <div style="border: 1px solid black; width: 100%; height: 10px; background-color: #e0e0e0; margin-bottom: 10px;"> <p style="margin: 0; font-weight: bold;">Signature (Sign inside the box)</p> </div> <div style="border: 1px solid black; width: 100%; height: 10px; background-color: #e0e0e0; margin-bottom: 10px;"> <p style="margin: 0; font-weight: bold;">Date Accomplished</p> </div> <div style="border: 1px solid black; width: 100%; height: 10px; background-color: #e0e0e0; margin-bottom: 10px;"> <p style="margin: 0; font-weight: bold;">Right Thumbmark</p> </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: 100%; height: 50px; margin-bottom: 10px;"></div> <div style="text-align: center; background-color: #e0e0e0; border: 1px solid black; padding: 2px; margin-bottom: 10px;"> <p style="margin: 0;">Person Administering Oath</p> </div>													