

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 if accomplished through own handwriting. Tick appropriate boxes ☐ ) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE.

I. PERSONAL INFORMATION													
1. SURNAME													
2. FIRST NAME								NAME EXTENSION (JR., SR)					
MIDDLE NAME													
3. DATE OF BIRTH (dd/mm/yyyy)				16. CITIZENSHIP		<input type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship							
4. PLACE OF BIRTH				If holder of dual citizenship, please indicate the details.		<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization							
5. SEX AT BIRTH		<input type="checkbox"/> Male <input type="checkbox"/> Female				Pls. indicate country:							
6 CIVIL STATUS		<input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:		<input type="checkbox"/> Married <input type="checkbox"/> Separated		17. RESIDENTIAL ADDRESS							
7. HEIGHT (m)						House/Block/Lot No. Street							
8. WEIGHT (kg)						Subdivision/Village Barangay							
9. BLOOD TYPE						City/Municipality Province							
10. UMID ID NO.						ZIP CODE							
11. PAG-IBIG ID NO.						18. PERMANENT ADDRESS							
12. PHILHEALTH NO.						House/Block/Lot No. Street							
13. PhilSys Number (PSN):						Subdivision/Village Barangay							
14. TIN NO.						City/Municipality Province							
15. AGENCY EMPLOYEE NO.						ZIP CODE							
						19. TELEPHONE 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 (dd/mm/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													
(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													
SECONDARY													
VOCATIONAL / TRADE COURSE													
COLLEGE													
GRADUATE STUDIES													
(Continue on separate sheet if necessary)													
SIGNATURE						DATE							

[illegible]

*(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.*

[illegible]

(Continue on separate sheet if necessary)

<b>SIGNATURE</b>		<b>DATE</b>	
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[illegible]

**(Continue on separate sheet if necessary)**

## VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

*(Continue on separate sheet if necessary)*

## VIII. OTHER INFORMATION

[illegible]

**(Continue on separate sheet if necessary)**

SIGNATURE		DATE	
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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, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____	
35. a. Have you ever been found guilty of any administrative offense?  b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____ Date Filed: _____ Status of Case/s: _____	
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____	
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?	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____	
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?  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?	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____	
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details (country): _____	
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277, as amended); and (c) Expanded Solo Parents Welfare Act (RA 11861), please answer the following items: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please specify ID No: _____	
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	OFFICE / RESIDENTIAL ADDRESS	CONTACT NO. AND/OR EMAIL
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.		

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i>
Government Issued ID:
ID/License/Passport No.:
Date/Place of Issuance:

Signature (Sign inside the box)
Date Accomplished

Passport-sized unfiltered digital picture taken within the last 6 months 4.5 cm. X 3.5 cm

PHOTO

Right Thumbmark

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath