

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)

2. SURNAME	DONAYRE		
FIRST NAME	GARY		NAME EXTENSION (JR., SR)
MIDDLE NAME	BULAHAN		
3. DATE OF BIRTH (mm/dd/yyyy)	10/16/1999	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	ORMOC CITY	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:	17. RESIDENTIAL ADDRESS	PUROK LEMONITO _____ Street SAN VICENTE _____ Barangay ORMOG CITY _____ LEYTE _____ Province 6541
7. HEIGHT (m)	1.63	ZIP CODE	
8. WEIGHT (kg)	47		
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	_____ Street _____ Barangay _____ Province
10. GSIS ID NO.		ZIP CODE	
11. PAG-IBIG ID NO.	121308554863		
12. PHILHEALTH NO.	13-252182646-4		
13. SSS NO.		19. TELEPHONE NO.	N/A
14. TIN NO.	618-470-987	20. MOBILE NO.	09465307017
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	itsgarydonayre@gmail.com

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	DONAYRE						
	FIRST NAME	GREGORIO	NAME EXTENSION (JR., SR) SR				
	MIDDLE NAME	GORON					
25. MOTHER'S MAIDEN NAME							
	SURNAME	BULAHAN					
	FIRST NAME	GLORIA					
	MIDDLE NAME	MARSON		(Continue on separate sheet if necessary)			

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	ORMOC CITY CENTRAL SCHOOL	PRIMARY EDUCATION	2008	2012	GRADUATE	2012	NONE
SECONDARY	ORMOC CITY REGIONAL SPORTS ACADEMY	SPORTS TRACK	2016	2018	GRADUATE	2018	WITH HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A

COLLEGE	EASTERN VISAYAS STATE UNIVERSITY	BACHELOR OF PHYSICAL EDUCATION	2018	2022	GRADUATE	2022	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A
(Continue on separate sheet if necessary)							
SIGNATURE			DATE				