

## 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.** ☐ CS ID No. (Do not fill up. For CSO use only.)

### PERSONAL INFORMATION

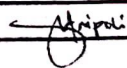
2. SURNAME	TRIPOLI		
FIRST NAME	AMOR MAY		NAME EXTENSION (JR, SR)
MIDDLE NAME	TIGOL		
3. DATE OF BIRTH (mm/dd/yyyy)	MAY 28, 2000	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country
4. PLACE OF BIRTH	WLPH	If holder of dual citizenship, please indicate the details	
5. SEX	<input type="checkbox"/> Male <input checked="" 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	
7. HEIGHT (m)	1.54	House/Block/Lot No. Street	
8. WEIGHT (kg)	48	Subdivision/Village Barangay	
9. BLOOD TYPE		City/Municipality Province	
10. GSIS ID NO.		ZIP CODE	
11. PAG-IBIG ID NO.		18. PERMANENT ADDRESS	
12. PHILHEALTH ID	13-025519429-4	House/Block/Lot No. Street	
13. SSN NO.		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)	

### 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	TRIPOLI			
FIRST NAME	SAMUEL		NAME EXTENSION (JR, SR)	
MIDDLE NAME	NUÑEZ			
25. MOTHER'S MAREN NAME	AMORA PAEL TIGOL			
SURNAME	TIGOL			
FIRST NAME	AMORA			
MIDDLE NAME	PAEL			

### 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)	YEAR GRADUATED	SCHOLARSHIP/ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	Marinas Elementary		June 2006	March 2012		2012	Valedictorian
SECONDARY	East Visayan Adventist Academy		June 2012	April 2018		2018	With Honors
VOCATIONAL / TRADE COURSE							
COLLEGE	Visayas State University	Bachelor in Secondary Education major in Social Studies	August 2018	Aug. 2022		2022	
GRADUATE STUDIES							

SIGNATURE		DATE	
		07-23-22	




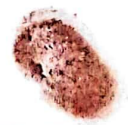



21	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (month/year)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	Interact Society	2018	2022		Member
	Boysbay Youth Organization	2018	2020		Secretary
	My Sister, My Friend	2022			President

(They) from the most recent L&O training program and include only the relevant L&O training dates for the last two (2) years for Division C&O (include Winghead positions)[illegible][illegible][illegible]

07- 23-22



<p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person who has immediate supervision over you in the 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</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 (Persons recommended 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>Ma. Joanne Bual</td> <td>Cardiway, Binal</td> <td></td> </tr> <tr> <td>Ritzelle G. Lanbo</td> <td>Malibag, So. Leyte</td> <td></td> </tr> <tr> <td>Joshua B. Casinillo</td> <td>Isabel, Leyte</td> <td></td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Ma. Joanne Bual	Cardiway, Binal		Ritzelle G. Lanbo	Malibag, So. Leyte		Joshua B. Casinillo	Isabel, Leyte	
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<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>Government Issued ID (e.g. Passport, GSIS, SSS, PRC Driver's License, etc.)</td> </tr> <tr> <td>PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government issued ID</td> </tr> <tr> <td>ID/Consul/Passport No.</td> </tr> <tr> <td>Date/Place of Issuance</td> </tr> </table>	Government Issued ID (e.g. Passport, GSIS, SSS, PRC Driver's License, etc.)	PLEASE INDICATE ID Number and Date of Issuance	Government issued ID	ID/Consul/Passport No.	Date/Place of Issuance	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 50px; text-align: center; vertical-align: middle;">  </td> </tr> <tr> <td style="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	<div style="text-align: center;">  <p>AMOR MAY T. TRIPOLI</p> </div> <div style="text-align: center;">  <p>Right Thumbmark</p> </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: 200px; height: 40px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>													