

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	TAN		
FIRST NAME	MARIA SUZETTE	NAME EXTENSION (JR., SR) NA	
MIDDLE NAME	AMADO NA		
3. DATE OF BIRTH (mm/dd/yyyy)	12/26/2985	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	JARO, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	Philippines	
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	LUNTAD Street CANHANDUGAN Barangay JARO LEYTE City/Municipality Province
7. HEIGHT (m)	1.54m	ZIP CODE	6527
8. WEIGHT (kg)	45 kg	18. PERMANENT ADDRESS	ZONE 1 LUNTAD Street CANHANDUGAN Barangay JARO LEYTE City/Municipality Province
9. BLOOD TYPE	O	ZIP CODE	6527
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	NA
11. PAG-IBIG ID NO.	N/A	20. MOBILE NO.	09164249210
12. PHILHEALTH NO.	13-050060282-2	21. E-MAIL ADDRESS (if any)	msuzette26tan@gmail.com
13. SSS NO.	06-2578704-1		
14. TIN NO.	290-904-25		
15. AGENCY EMPLOYEE NO.	NA		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	TAN		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	RONEL	NAME EXTENSION (JR., SR) NA	MATT RAFAEL A. TAN	08/27/2016
MIDDLE NAME	CABRILES		EMMAN SIMON A. TAN	02/21/2018
OCCUPATION	OFW		*****NOTHING FOLLOWS*****	
EMPLOYER/BUSINESS NAME	ALOUNA GLASS ALUMINUM SUPPLY			
BUSINESS ADDRESS	SAUDI ARABIA			
TELEPHONE NO.	+966568114503			
24. FATHER'S SURNAME	AMADO			
FIRST NAME	DIOSDADO	NAME EXTENSION (JR., SR) NA		
MIDDLE NAME	NARIDO			
25. MOTHER'S MAIDEN NAME	LOLITA			
SURNAME	AMADO			
FIRST NAME	LOLITA BALONZA MORFE			
MIDDLE NAME	MORFE			

(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	CANHANDUGAN ELEMENTARY SCHOOL	ELEMENTARY	06/10/1994	04/15/1999	GRADUATED	1999	N/A
SECONDARY	GRANJA KALINAWAN NATIONAL HIGH SCHOOL	HIGH SCHOOL	06/04/1999	03/20/2003	GRADUATED	2003	N/A
VOCATIONAL / TRADE COURSE	AMA COMPUTER LEARNING CENTER	BOOKKEEPING NC III	11/08/2010	12/22/2010	COMPLETED	2015	TESDA SCHOLAR
COLLEGE	EASTERN VISAYAS STATE UNIVERSITY, CARIGARA CAMPUS	DIPLOMA IN TEACHING SECONDARY	06/08/2017	07/9/2019	GRADUATED	2019	N/A
COLLEGE	LEYTE COLLEGES	BACHELOR OF SCIENCE IN COMMERCE MAJOR IN BANKING AND FINANCE	06/10/2004	04/10/2008	GRADUATED	2008	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE

[Signature]

DATE

May 22, 2025

[illegible]

V. WORK EXPERIENCE

[illegible]**SIGNATURE**

~~Ng Tam~~

DATE


05/22/2025

[illegible]

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED	
1. Name of the Program	
2. Duration	
3. Description of the Program	
4. Key Takeaways	
5. How will you apply the knowledge/skills learned?	
6. Other relevant information	

[illegible]

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
COMPUTER LITERATE	NA	NA
NOTHING FOLLOWS		

SIGNATURE		DATE	05/22/2025
-----------	---	------	------------

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)?

☐ YES ☒ NO
☐ YES ☒ 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?

☐ YES ☒ NO
If YES, give details: _____
☐ YES ☒ 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?

☐ YES ☒ 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?

☒ YES ☐ NO
If YES, give details: FINISHED CONTRACT

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?

☐ YES ☒ NO
If YES, give details: _____
☐ YES ☒ NO
If YES, give details: _____

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES ☒ NO
If YES, give details (country): _____

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:
a. Are you a member of any indigenous group?
b. Are you a person with disability?
c. Are you a solo parent?

☐ YES ☒ NO
If YES, please specify: _____
☐ YES ☒ NO
If YES, please specify ID No: _____
☐ YES ☒ NO
If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
ANNA BELLAC. DISPO	BRGY. ARADO, PALO, LEYTE	0927-534-4921
HON. FE CALUBIRAN	BRGY.CANHANDUGAN JARO, LEYTE	0930-146-2723
MR.JASON PERMEJO	BRGY.CANHANDUGAN JARO, LEYTE	0963-078-3661

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.



PHOTO

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: **PROFESSIONAL REGULATION COMMISSION**

ID/License/Passport No.: **2020576**

Date/Place of Issuance: **04/12/2023/ TACLOBAN CITY**

Signature (Sign inside the box)
05/22/2025
Date Accomplished



SUBSCRIBED AND SWORN to before me this

22 MAY 2025

, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. LEVIE C. MILLEGAS
PUBLIC ATTORNEY II
(PURSUANT TO RA 9406)
Person Administering Oath