

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 MIDDLE NAME	CORNICO			
	MYRA MAE			NAME EXTENSION (JR., SR) N/A
	N/A			
3. DATE OF BIRTH (mm/dd/yyyy)	12/3/1999	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.	<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	BAYBAY CITY			
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 ZIP CODE	N/A N/A	
			House/Block/Lot No. Street	
LOPFA KILIM				
Subdivision/Village Barangay				
BAYBAY CITY LEYTE				
City/Municipality Province				
7. HEIGHT (m)	149.5 cm.			
8. WEIGHT (kg)	53 kg.		6521	
9. BLOOD TYPE		18. PERMANENT ADDRESS ZIP CODE	N/A N/A	
			House/Block/Lot No. Street	
LOPFA KILIM				
Subdivision/Village Barangay				
BAYBAY CITY LEYTE				
City/Municipality Province				
11. PAG-IBIG ID NO.	121280579750		6521	
12. PHILHEALTH NO.	13-251919102-8			
13. SSS NO.	06-4487184-4	19. TELEPHONE NO.	N/A	
14. TIN NO.		20. MOBILE NO.	09309299066	
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	myra.cornico@vsu.edu.ph	

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
	N/A	NAME EXTENSION (JR., SR) N/A		
	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME FIRST NAME MIDDLE NAME	LOBRINO			
	ROLANDO	NAME EXTENSION (JR., SR) N/A		
	MEDALLO			
25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME				
	CORNICO			
	MYRA			
	MORENO		(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	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	GABAS INTEGRATED SCHOOL	ELEMENTARY	2006	2012	GRADUATED	2012	WITH HONOR
SECONDARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPCION	SECONDARY	2016	2018	GRADUATED	2018	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF PHYSICAL EDUCATION	2018	2022	GRADUATED	2022	CUM LAUDE
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTERS OF EDUCATION IN PHYSICAL EDUCATION	2023	PRESENT	30 UNITS	N/A	N/A

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	July 4, 2025

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	VISAYAS STATE UNIVERSITY DANCE COMPANY	8/16/2018	8/22/2022	4 YEARS	FOLK DANCER
	SANGGUNIANG KABATAAN OF KILIM	7/29/2019	10/31/2023	4 YEARS	SANGGUNIANG KABATAAN TREASURER

(Continue on separate sheet if necessary)

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

(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)

30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	BASIC RESERVE OFFICERS TRAINING CORPS (COMPONENT OF THE NATIONAL SERVICE TRAINING PROGRAM					
	Basic Life Support with CPR Guidelines with AED, Foreign Body Airway, Obstruction and Big Valve Mask Applications, Occupational First Aid Training	3/4/2024	3/6/2024			AUX. LT. RAY GLENN R. VERUEN, PCGA (EMT)
	Regional SCUAA 2023 - Assistant Coach	10/22/2023	10/27/2023			Visayas State University, Visca Baybay City, Leyte
	Regional SCUAA 2024 - Coach	12/8/2024	12/13/2024			Northwest Samar State University, Calbayog, Northern Samar
	National SCUAA 2024 - Coach	4/22/2025	4/27/2025			Camiguin Polytechic State College, Mambaiao, Camiguin



(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	ATHLETICS OFFICIATING			SANGGUNIANG KABATAAN TREASURER
	FOLK DANCING			
	CAN PLAY SPORTS LIKE BADMINTON, PICKLEBALL			
	COMPUTER LITERACY			
	IINTERPERSONAL AND COMMUNICATION SKILLS			
	TEAMWORK AND ADAPTABILITY SKILLS			
	COACHING			

(Continue on separate sheet if necessary)

SIGNATURE		DATE	July 4, 2025
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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, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>												
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 a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div>												
	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)													
<table><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr><tr><td>KEVIN R. SUMAYANG</td><td>Visca, Baybay City, Leyte</td><td></td></tr><tr><td>SHEENA EUNICE TABUDLONG</td><td>Visca, Baybay City, Leyte</td><td></td></tr><tr><td></td><td></td><td></td></tr></table>		NAME	ADDRESS	TEL. NO.	KEVIN R. SUMAYANG	Visca, Baybay City, Leyte		SHEENA EUNICE TABUDLONG	Visca, Baybay City, Leyte				
NAME	ADDRESS	TEL. NO.											
KEVIN R. SUMAYANG	Visca, Baybay City, Leyte												
SHEENA EUNICE TABUDLONG	Visca, Baybay City, Leyte												
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.													
<div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: PASSPORT</div> <div>ID/License/Passport No.: P1710912C</div> <div>Date/Place of Issuance: SEPTEMBER 17, 2022</div>	<div><div></div><div>Signature (Sign inside the box)</div><div>July 4, 2025</div><div>Date Accomplished</div></div> <div><div></div><div>PHOTO</div><div><div></div><div>Right Thumbmark</div></div></div>												
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.													
<div></div> <div>Person Administering Oath</div>													