PERSONAL DATA SHEET

the filing of administrative/criminal case/s against the person

READ THE ATTACHED GUIDE Print legibly. Tick appropriate boxe	TO FILLING OUT THE PERSONAL DATA SI	HEET (PDS) BEFORE ACCO e N/A if not applicable. DO NOT	MPLISHING TO ABBREVIATE.	HE PD\$ FO	1 CS ID No		(Do not fill up	For CSC use only
I. PERSONAL INFORMATION								
2. SURNAME	JABUEN					NAME EXTENSION (JR	, SR)	
FIRST NAME	JUNAS		N/A					
MIDDLE NAME	ESPE JON							
3. DATE OF BIRTH	LOT LITO IX	16. CITIZENSHIP		Filipino Dual Citizensi				
(mm/dd/yyyy)	10 / 12 / 1996			✓ by birth Pls. indicat			by naturalization	
4. PLACE OF BIRTH	KAWAYAN BILIRAN	If holder of dual citiz				1 10. 111010010	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_
5. SEX	Male Female		Telailo.					
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS		House/Block/Lot No.			Street	
	☐ Widowed ☐ Separated ☐ Other/s:		Su	ubdivision/Villa	ge		VILLA Co Barangay	DRN EJO
7 HEIGHT (m)	The Line I have been			AWAYAN city/Municipalit		,	BILIRAN	
	1- 65	710 0005						
8 WEIGHT (kg)	70	18. PERMANENT ADDRESS	63	62	Covered La	i lyine s		
9. BLOOD TYPE	AB		Hot	use/Block/Lot i	No		Street VIIIA CF	RNF.JO
10. GSIS ID NO.	NONE	L. LEGETHIT MODELS	Su	ubdivision/Villa	ge	THE PARTY AND THE	VILLA CC Barangay	7(1)1200
11. PAG-IBIG ID NO.	121232739103	MERCHANICAL AND A	KA	WAYAN ity/Municipality	у	- Andrews	BILIRAN	
12. PHILHEALTH NO.		ZIP CODE	i i	6.2				
13. SSS NO	130255124197	19. TELEPHONE NO.						
	06-4170944-3	20. MOBILE NO.	NONE					
14. TIN NO.	359-870-492-0000		09454511932					
15. AGENCY EMPLOYEE NO.	NONE	21. E-MAIL ADDRESS (if any)	<i>jejabue</i>	n@up.	edu-ph			
II. FAMILY BACKGROUND			23. NAME of CI-	HI DREN (Wri	ite full name an	d list all)	DATE OF BIF	RTH (mm/dd/yyyy
22. SPOUSE'S SURNAME	N/A	NAME EXTENSION (JR., SR)						
FIRST NAME			NONE					
MIDDLE NAME								
OCCUPATION								VET ROLL
EMPLOYER/BUSINESS NAME								
BUSINESS ADDRESS								
TELEPHONE NO.			1					
4. FATHER'S SURNAME	JABUEN	NAME EXTENSION (JR., SR)						
FIRST NAME	RAU	I N/A						
MIDDLE NAME	MONFIEL							
5. MOTHER'S MAIDEN NAME	LIGAYA ASOSOLA ESPEJON							
SURNAME	JABUEN							
FIRST NAME	LIGAYA			(0	Continue on se	parate sheet if neces	ssarv)	
MIDDLE NAME	ESPEJON			10	onunue on se	parate sheet it head		
I. EDUCATIONAL BACKG				arnion or	ATTENDANCE	HIGHEST LEVEL/		SCHOLARSHIP/
6. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF	ATTENDANCE	UNITS EARNED (if not graduated)	YEAR GRADUATED	
			of the least	From	То			RECEIVED
ELEMENTARY	EAST REMBO ELEMENTARY SCHOOL	PRIMARY EDUCATION		2003	2009	GRADUATED	2009	NONE
SECONDARY	BENIGNO "NINDY" AQUIND HIGH SCHOOL	HIGH SCHOOL		2009	2010	1ST YEAR AS	N/A	NONE
VOCATIONAL /	TUCDAO NATIONAL HIGH SCHOOL	HIGH SCHOOL		2010	aoB	GRADUATED	2013	salutatorian
TRADE COURSE	NONE							
COLLEGE	UNIVERSITY OF THE PHILIPPINES VISAYAS - TACLOBAN COLLEGE	BACHELOR OF SCIE	nct in	2013	2018	GRADUATED	2018	NONE
GRADUATE STUDIES	INTERNATION THE COLLEGE	MANAGEMENT	TAR	100		THE SHITTER		
STATE OT ODIES	NONE	Continue on separate sheet If nec	essary)					
SIGNATURE	Q _C		Told St.	DA	ATE	AUGUST 2	8, 2020	D18 1 1
	0/				THE REAL PROPERTY.			ed 2017), Page 1 of 4

-							LIGHTIGH III	
	RA 1080 (BOARD/ BAR) UNDER	RATING	DATE OF	DI ACE CE EVAMINAT	ION / CONFE	RMENT	LICENSE (if ap	pplicable) Date of
ODEOLAL LAWISLOSSICOSSIS		(If Applicable)	EXAMINATION / CONFERMENT	EXAMINATION / PLACE OF EXAMINATION / CONFERMENT			NUMBER	Validity
CIVIL SERVICE ELIGIBILITY - PROFESSIONAL 89		89.09	AUGUST 12,2018	AUGUST 12,2018 FEYTE NATIONAL H		100	N/A	AIN
						Carolina Car		
						-		
Lagore	the state of the s					la Las		
		(Co	ontinue on separate sheet	if necessary)	6/1, 1	delente		
WORK EXPERIEN Iclude private emplo	CE ment. Start from your recen	t work) Descriptio	n of duties should be	indicated in the attached	Work Expe	rience sheet.		
INCLUSIVE DATES (mm/dd/yyyy) From To	POSITION (Write in full/Do no			ENCY / OFFICE / COMPANY II/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVIC (Y/ N)
	DENIOR HIGH SCHOOL		DEPARTMENT OF	F EDUCATION REGION OF BILIRAN	22,938	12	Contractual	γ
6/06/2017 04/30/3	OLD REVIEW MASTER IN	IATH TUTOR	BRAINBOX TUTO	DRIAL & REVIEW CENTER	4,000	N/A	contractual	N
1/01/2016 11/01/2	OIG COACH	DR/ FOOT BALL	FUNDUFE INT	ERNATIONAL	3,000	N/A	Contractual	N
		34.1	,			420.54		
		1/2			- 785	-		
					2 - 2 - 2 - 2			
						175		
		37						
					45-65-			
	956							
				TRIVILL		J. 32/03/		
						Dead		
						43 34 ST		
						ANA ANI		L WILL
						422,190,5		
			,					
N.M. T. 1875	The rade of large		Although to	AMERICAN SERVICES	(LOB 20	Photogram		
	S. FALMAZWI S. S. S.	-0/08-1	(23/12)	Auth L. waite hi	The state of the s	ALC: N		
2011		30	2 2 9 5 E 19 E 10	BURE DECISION	799 79	10000		
					Man b	1000		and)
			Continue on separate she	et if necessary)				

NAME & ADDRESS OF ORGANIZATION (Write in full) ROSERNMENT / PEOPLE / VOLUNTARY ORGANIZATION (Write in full) ROSERNMENT / PEOPLE / VOLUNTARY ORGANIZATION (Write in full) ROSERNMENT / PEOPLE / VOLUNTARY ORGANIZATION (Write in full) ROSERNMENT / PEOPLE / VOLUNTARY ORGANIZATION (Write in full) ROSERNMENT / PEOPLE / VOLUNTARY ORGANIZATION (Write in full)	URE OF WORK		
NONE	a polycate k		
ACC.			
(Continue on separate sheef 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 (mm/dd/yyyy) From To To Type of LD (Managerial/ Supervisory/ Technical/etc)	UCTED/ SPONSORED BY (Write in full)		
GENDER AND DEVELOPMENT TRAINING 12/13/2019 12/13/2017 8 hrs. technical Tuckdo Na	tional High School		
	resident payment of the		
AN PARTIES AND	CANADAM N		
Mark to establish S. J. P.			
	all control of		
Sent Market State (Control of Control of Con			
to gradient state of the property of the state of the sta	11 (0) All 9500		
(Continue on separate sheet if necessary)			
III. OTHER INFORMATION	NA AGGORATION OF CANADA STATION		
31. SPECIAL SKILLS and HOBBIES 32 NON-ACADEMIC DISTINCTIONS / RECOGNITION 33. MEMBERSHIP (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
SINGING NONE UP YOUTH	UP YOUTH FOR CHRIST		
JEKETCHING			
	nistant T 19		
SIGNATURE (Continue on separate sheet if necessary) DATE AUGUST 2	8, 2020		

34. Are you related by consanguinity or affinity to the chief of bureau or office or to the person who has mimed Bureau or Department where you will be apppointed,	ting or recommending authority, or to the iate supervision over you in the Office,				
a. within the third degree?	☐ YES ☑ NO				
b. within the fourth degree (for Local Government Unit - C	YES NO				
D. William the local of degree (i.e. 2002)	If YES, give details:				
35. a. Have you ever been found guilty of any administrative	YES NO				
		If YES, give details:			
b. Have you been criminally charged before any court?		YES NO			
		If YES, give details:			
	Date Filed: Status of Case/s:				
36. Have you ever been convicted of any crime or violation of	f any law, decree, ordinance or regulation	by YES NO			
any court or tribunal?	If YES, give details:				
37. Have you ever been separated from the service in any of	f the following modes: resignation,	☐ YES ☑ NO			
retirement, dropped from the rolls, dismissal, termination, (abolition) in the public or private sector?	nal modern receive	out If YES, give details:			
38. a. Have you ever been a candidate in a national or local Barangay election)?	☐ YES ☑ NO If YES, give details:				
b. Have you resigned from the government service during	t YES NO				
election to promote/actively campaign for a national or lo	If YES, give details:				
39. Have you acquired the status of an immigrant or perman	ent resident of another country?	YES NO			
		If YES, give details (country):			
 Pursuant to: (a) Indigenous People's Act (RA 8371); (b) I 7277); and (c) Solo Parents Welfare Act of 2000 (RA 897) 					
Are you a member of any indigenous group?	72), please answer the following items:				
		☐ YES ☐ NO If YES, please specify:			
Are you a person with disability?	☐ YES ☐ NO If YES, please specify ID No:				
Are you a solo parent?	YES ☑ NO If YES, please specify ID No:				
41. REFERENCES (Person not related by consanguinity or affinity to appl	icant /appointee)	· ·			
NAME	ADDRESS	TEL NO.			
HELEN C. YIL	TUCDAO, KAWAYAN, BILIRAN	09176769195			
RACHELLE DADO	NAVAL, BILIRAN	09661654869			
MARIEL OBREGON	TACLOBAN CITY	09171459603			
42. I declare under oath that I have personally accomplise complete statement pursuant to the provisions of pe Philippines. I authorize the agency head/authorized repragree that any misrepresentation made in this deadministrative/criminal case/s against me.	rtinent laws, rules and regulations of the esentative to verify/validate the contents st	e Republic of the JUNAS E. JABUEN			
Government Issued ID (i.e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	in comment of the second				
Government Issued ID: PH(L H EALT #	90				
ID/License/Passport No.: 12 - 0255 124 19-7	le box)				
Date/Place of Issuance: Jahuary 13, 2016	0 Right Thumbmark				
SUBSCRIBED AND SWORN to before me this _Augu	15† 30 , 2020 , affiant exhib	oiting his/her validly issued government ID as indicated above.			
	Hon. Regie E- Delante				
	Barangay Captain				
	Person Administering C	Dath			