

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	LLESIS		
FIRST NAME	PHIA JANE	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	MALANGUIS		
3. DATE OF BIRTH (mm/dd/yyyy)	01/23/1998	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	MANILA CITY	If holder of dual citizenship, please indicate the details.	Philippines ▼
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	N/A C.V ALQUINO ST. House/Block/Lot No. Street LAMBERTE CENTRAL Subdivision/Village Barangay HILONGOS LEYTE City/Municipality Province
7. HEIGHT (m)	1.60	ZIP CODE	6524
8. WEIGHT (kg)	50		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	N/A C.V ALQUINO ST. House/Block/Lot No. Street LAMBERTE CENTRAL Subdivision/Village Barangay HILONGOS LEYTE City/Municipality Province
10. GSIS ID NO.	NONE	ZIP CODE	6524
11. PAG-IBIG ID NO.	NONE		
12. PHILHEALTH NO.	13-250530174-2	19. TELEPHONE NO.	NONE
13. SSS NO.	NONE	20. MOBILE NO.	09272858884
14. TIN NO.	647-828-748-00000	21. E-MAIL ADDRESS (if any)	pjllesis98@gmail.com
15. AGENCY EMPLOYEE NO.	BiPSU - 0959		

II. FAMILY BACKGROUND

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	NONE	
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	LLESIS			
FIRST NAME	PIO	NAME EXTENSION (JR., SR) JR		
MIDDLE NAME	AQUINO			
25. MOTHER'S MAIDEN NAME	MALANGUIS			
SURNAME	LLESIS			
FIRST NAME	JANET			
MIDDLE NAME	DENIO		(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	GRELINA OSMENIA CHRISTIAN COLLEGE	PRIMARY	2007	2011	GRADUATED	2011	N/A
SECONDARY	GRELINA OSMENIA CHRISTIAN COLLEGE	HIGH SCHOOL	2011	2015	GRADUATED	2015	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY - MAIN	BACHELOR OF SCIENCE IN DEVELOPMENT COMMUNICATION	2015	2019	GRADUATED	2019	N/A
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY - MAIN	MASTER OF SCIENCE IN DEVELOPMENT COMMUNICATION	2021	N/A	15	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	January 6, 2025
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V. WORK EXPERIENCE
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

SIGNATURE	<i>Phyllane</i>	DATE	January 6, 2025
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VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED <i>(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)</i>	
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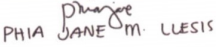

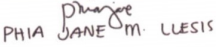

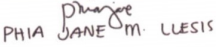
(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS AND HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Data Entry	Best Research Personnel 2023	Visayas State University - Alumni Association Inc.
Sony Vegas Pro		
Adaucity		
Canva / Canva Pro		

(Continue on separate sheet if necessary)

SIGNATURE	<i>Phiasane</i>	DATE	January 6, 2025
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<p>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,</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 items:</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><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</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 (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>WINDESA B. YAP</td> <td>BAYBAY CITY, LEYTE</td> <td></td> </tr> <tr> <td>JEDESS MILANEL SALOMON</td> <td>BAYBAY CITY, LEYTE</td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	WINDESA B. YAP	BAYBAY CITY, LEYTE		JEDESS MILANEL SALOMON	BAYBAY CITY, LEYTE						
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WINDESA B. YAP	BAYBAY CITY, LEYTE														
JEDESS MILANEL SALOMON	BAYBAY CITY, LEYTE														
<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>															
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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: 250px; height: 60px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>															