

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 () ☐ 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	Salas		
FIRST NAME	Marie Fretchie		NAME EXTENSION (JR., SR)
MIDDLE NAME	Oquias		
3. DATE OF BIRTH (mm/dd/yyyy)	03/20/1992	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	Lapu-lapu City	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	N/A House/Block/Lot No. Street N/A Brgy. Kilim Subdivision/Village Barangay Baybay City Leyte City/Municipality Province ZIP CODE 6521
7. HEIGHT (m)	1.58m	18. PERMANENT ADDRESS	N/A House/Block/Lot No. Street N/A Brgy. Kilim Subdivision/Village Barangay Baybay City Leyte City/Municipality Province ZIP CODE 6521
8. WEIGHT (kg)	65 kg	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	AB+	20. MOBILE NO.	09496391743
10. GSIS ID NO.	N/A	21. E-MAIL ADDRESS (if any)	mariefretchiesalas@gmail.com
11. PAG-IBIG ID NO.	915290130795		
12. PHILHEALTH NO.	13-050177191-1		
13. SSS NO.	06-3333875-4		
14. TIN NO.	432-856-603		
15. AGENCY EMPLOYEE NO.	N/A		

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	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	Salas			
FIRST NAME	Alfredo	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Pitogo			
25. MOTHER'S MAIDEN NAME				
SURNAME	Oquias			
FIRST NAME	Teresita			
MIDDLE NAME	Inot			

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	Kilim Elementary School	Primary Education	06/07/1999	03/29/2004		2004	
SECONDARY	Baybay National High School	Secondary Education	06/14/2004	04/04/2008		2008	
VOCATIONAL / TRADE COURSE	Palermo Hotel Institute of Technology and Hospitality, Inc.	National Certificate II in Housekeeping	10/06/2014	03/14/2015		2015	
COLLEGE	Franciscan College of the Immaculate Conception	Bachelor of Science in Business Administration Major in Financial Management	10/17/2016	03/16/2020		2020	
GRADUATE STUDIES	N/A	N/A	N/A	N/A		N/A	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	April 6, 2021
-----------	---	------	---------------

[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	April 6, 2021
-----------	---	------	---------------

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

[illegible]

(Continue on separate sheet if necessary)

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

[illegible]







(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)
	Works Hard		N/A		N/A
	Gets things done				
	Responsible				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	April 6, 2021
-----------	---	------	---------------

<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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Resignation</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>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 (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>Imelda V. Calatraba</td> <td>Tab-ang, Brgy. Kilim, Baybay City, Leyte</td> <td>9971779060</td> </tr> <tr> <td>Allen G. Modina</td> <td>20 G.H. del Pilar St. Baybay City, Leyte</td> <td>9651850436</td> </tr> <tr> <td>Hon. Douglas Baltazar</td> <td>Tab-ang, Brgy. Kilim, Baybay City, Leyte</td> <td>N/A</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Imelda V. Calatraba	Tab-ang, Brgy. Kilim, Baybay City, Leyte	9971779060	Allen G. Modina	20 G.H. del Pilar St. Baybay City, Leyte	9651850436	Hon. Douglas Baltazar	Tab-ang, Brgy. Kilim, Baybay City, Leyte	N/A
NAME	ADDRESS	TEL. NO.											
Imelda V. Calatraba	Tab-ang, Brgy. Kilim, Baybay City, Leyte	9971779060											
Allen G. Modina	20 G.H. del Pilar St. Baybay City, Leyte	9651850436											
Hon. Douglas Baltazar	Tab-ang, Brgy. Kilim, Baybay City, Leyte	N/A											
<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>													
<p>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</p> <p>PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: TIN ID</p> <p>ID/License/Passport No.: 432-856-603</p> <p>Date/Place of Issuance: 02-26-13/BIR ORMOC</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; height: 100px;">  Signature (Sign inside the box) APRIL 6, 2021 Date Accomplished </td> <td style="text-align: center; height: 100px;">  Right Thumbmark </td> </tr> </table>	 Signature (Sign inside the box) APRIL 6, 2021 Date Accomplished	 Right Thumbmark										
 Signature (Sign inside the box) APRIL 6, 2021 Date Accomplished	 Right Thumbmark												
<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; text-align: center; line-height: 60px;"> Person Administering Oath </div>													



PHOTO

