

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	OQUIAS		
FIRST NAME	JHEZEL	NAME EXTENSION (JR, SR) N/A	
MIDDLE NAME	BACALSO		
3. DATE OF BIRTH (mm/dd/yyyy)	09/13/1999	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	ORMOC 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	MACATOL House/Block/Lot No. Street PUERTO BELLO Subdivision/Village Barangay MERIDA LEYTE City/Municipality Province 6540
7. HEIGHT (m)	149m	18. PERMANENT ADDRESS	MACATOL House/Block/Lot No. Street PUERTO BELLO Subdivision/Village Barangay MERIDA LEYTE City/Municipality Province 6540
8. WEIGHT (kg)	37kg	19. TELEPHONE NO.	NONE
9. BLOOD TYPE	UNKNOWN	20. MOBILE NO.	0935 933 4529
10. GSIS ID NO.	N/A	21. E-MAIL ADDRESS (if any)	oquiasjhezel808@gmail.com
11. PAG-IBIG ID NO.	1213-1125-2248		
12. PHILHEALTH NO.	13-025615780-3		
13. SSS NO.	06-4508643-4		
14. TIN NO.	778-569-218-00000		
15. AGENCY EMPLOYEE NO.	24622		

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 ; N/A	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	OQUIAS			
FIRST NAME	BENJAMIN	JR.		
MIDDLE NAME	BAÑO			
25. MOTHER'S MAIDEN NAME	PABLITA SAMPON BACALSO			
SURNAME	OQUIAS			
FIRST NAME	PABLITA			
MIDDLE NAME	BACALSO			

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	PUERTO BELLO ELEMENTARY SCHOOL	ELEMENTARY	2006	2012	N/A	2012	WITH HONOR
SECONDARY	PUERTO BELLO NATIONAL HIGH SCHOOL	HIGH SCHOOL AND SENIOR HIGH SCHOOL	2012	2018	N/A	2018	WITH HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRIBUSINESS	2018	2022	N/A	2022	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

SIGNATURE		DATE	JUNE 20, 2025
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[illegible]

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

~~Signature~~

JUNE 20, 2025

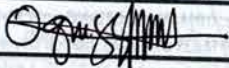
VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

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

[illegible]

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
ACCURATE CASH HANDLING	N/A	SAINT RITA LECTORS GUILD
BASIC FINANCIAL KNOWLEDGE		CHORUS ANGELORUM
STRONG CUSTOMER SERVICE ABILITIES		
MS WORD & EXCEL LITERATE		
READING BOOKS		
WATCHING MOVIES		
ABSTRACT & LINES		
<div> <div>SIGNATURE</div> <div>  </div> <div>DATE</div> <div>JUNE 20, 2025</div> </div>		

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:

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.
JASON S. ZABALA	TOMAS OPPUS, SOUTHERN LEYTE	0931 728 5107
JESTHONY M. BARING	APALE, ISABEL, LEYTE	0912 572 0993
FLORENCE L. CALDERON	PUERTO BELLO, MERIDA, LEYTE	0999 731 1328

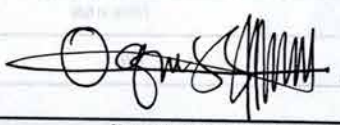
42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate 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.

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

Government Issued ID: PHILSYS ID

ID/License/Passport No.: 3290-2642-3042-0521


Date/Place of Issuance: 07/21/2022 / MERIDA LEYTE




Signature (Sign inside the box)

JUNE 20, 2025

Date Accomplished



CHEZEL B. EGUILAS



Right Thumbmark

SUBSCRIBED AND SWORN to before me this JUN 23 2025, affiant exhibiting his/her validly issued government ID as indicated above.

Doc. No.: 56
Page No.: 66
Book No.: IV
Series of: 2025

ATTY. ROVELSON R. VELMONTE

Notary Public for the City of Ormoc

Municipalities of Kananga, Matag-ob, Merida & Isabel

Commission No. 0011-25-12-022-NC until 12-31-25

PTR No. 0011-25-12-022-NC until 12-31-25

IBP No. 491410, issued on 01-02-25, Leyte

Roll No. 57743; TIN No. 241-661-869

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