

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	BARCOS		
FIRST NAME	CERIACO	JR	
MIDDLE NAME	ALCASODA		
3. DATE OF BIRTH (mm/dd/yyyy)	08-28-1990	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	BAYBAY CITY, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" 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:		
7. HEIGHT (m)	1.7	17. RESIDENTIAL ADDRESS	ZONE 3, NANGKA
8. WEIGHT (kg)	72	ZIP CODE	House/Block/Lot No. Street
9. BLOOD TYPE	O+		GUADALUPE
10. GSIS ID NO.			Subdivision/Village Barangay
11. PAG-IBIG ID NO.	1212-0381-5987		BAYBAY CITY LEYTE
12. PHILHEALTH NO.	13-202073826-3		City/Municipality Province
13. SSS NO.		6521 PHILIPPINES	
14. TIN NO.	272-838-030-000	18. PERMANENT ADDRESS	ZONE 3, NANGKA
15. AGENCY EMPLOYEE NO.		ZIP CODE	House/Block/Lot No. Street
			GUADALUPE
			Subdivision/Village Barangay
			BAYBAY CITY LEYTE
			City/Municipality Province
		6521 PHILIPPINES	
		19. TELEPHONE NO.	
		20. MOBILE NO.	09203598346
		21. E-MAIL ADDRESS (if any)	ceriacobarcos@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	BARCOS		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ROSITA	NAME EXTENSION (JR., SR)	GRAYSON JOHN ABANERA	06-19-2020
MIDDLE NAME	ALCASODA			
OCCUPATION	HOUSE WIFE			
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME				
FIRST NAME				
MIDDLE NAME				
25.				
SURNAME	ABANERA			
FIRST NAME	GILNA			
MIDDLE NAME	RABINO		(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	GUADALUE ELEMENTARY SCHOOL		1997	2003			
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL		2003	2007	HIGH SCHOOL GRADUATE	2007	
VOCATIONAL / TRADE COURSE							
COLLEGE							
GRADUATE STUDIES							

SIGNATURE		DATE	September 8, 2023
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[illegible]

(Continue on separate sheet if necessary)

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

[illegible]

(rate sheet if necessary)

SIGNATURE			DATE		September 8, 2023
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[illegible][illegible]




VIII. OTHER INFORMATION

	NON-ACADEMIC DISTINCTIONS / RECOGNITION	MEMBERSHIP IN ASSOCIATION/ORGANIZATION
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31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	CARPENTER				KARANCHO
	DRIVER				
	BAKER				
	WELDER				

SIGNATURE			DATE		September 8, 2023
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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 style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">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>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 style="text-align: center;">GILNA R. ABANERA</td> <td style="text-align: center;">BRGY. GUADALUPE BAYBAY CITY, LEYTE</td> <td style="text-align: center;">09203598346</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	GILNA R. ABANERA	BRGY. GUADALUPE BAYBAY CITY, LEYTE	09203598346						
NAME	ADDRESS	TEL. NO.											
GILNA R. ABANERA	BRGY. GUADALUPE BAYBAY CITY, LEYTE	09203598346											
<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>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i></td> </tr> <tr> <td style="width: 50%;">Government Issued ID:</td> <td style="width: 50%;">Driver's License</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>H12-12-001740</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>2022/03/07</td> </tr> </table>	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i>		Government Issued ID:	Driver's License	ID/License/Passport No.:	H12-12-001740	Date/Place of Issuance:	2022/03/07	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">  Signature (Sign inside the box) </td> </tr> <tr> <td style="text-align: center;">September 08, 2023</td> </tr> <tr> <td style="text-align: center;">Date Accomplished</td> </tr> </table>	 Signature (Sign inside the box)	September 08, 2023	Date Accomplished	
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Person Administering Oath	Right Thumbmark												
<p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p>													



PHOTO

Right Thumbmark