

# 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 if accomplished through own handwriting. Tick appropriate boxes ☐ and use separate sheet if necessary. Indicate N/A if not applicable. **DO NOT ABBREVIATE.**

## I. PERSONAL INFORMATION

1. SURNAME	ROSAL		
2. FIRST NAME	ALERA	NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	MONTALBAN		
3. DATE OF BIRTH (dd/mm/yyyy)	08/09/2000	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	CALINGATNAN, ALBUERA, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX AT BIRTH	<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:		
7. HEIGHT (m)	1.53	17. RESIDENTIAL ADDRESS	N/A House/Block/Lot No. Street CALINGATNAN SAN PEDRO Subdivision/Village Barangay ALBUERA LEYTE City/Municipality Province
8. WEIGHT (kg)	50	ZIP CODE	
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	N/A House/Block/Lot No. Street CALINGATNAN SAN PEDRO Subdivision/Village Barangay ALBUERA LEYTE City/Municipality Province
10. UMID ID NO.	06-4475320-5	ZIP CODE	6542
11. PAG-IBIG ID NO.	1213-0807-8956	19. TELEPHONE NO.	N/A
12. PHILHEALTH NO.	13-250294296-8	20. MOBILE NO.	09949122965
13. PhilSys Number (PSN):	3729821749683902	21. E-MAIL ADDRESS (if any)	alerarosal8@gmail.com
14. TIN NO.	615-722-053		
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 (dd/mm/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR) 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	ROSAL			
FIRST NAME	GREGORIO	NAME EXTENSION (JR., SR) JR.		
MIDDLE NAME	CONSTANTE			
25. MOTHER'S MAIDEN NAME				
SURNAME	MONTALBAN			
FIRST NAME	ANA			
MIDDLE NAME	BURLASA			

(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	CALINGATNAN ELEMENTARY LEYTE	ELEMENTARY	2006	2012	GRADUATED	2012	WITH HONOR
SECONDARY	DR. GERONIMO B. ZALDIVAR MEMORIAL SCHOOL OF FISHERIES	JUNIOR HIGH SCHOOL AND SENIOR HIGH SCHOOL	2012	2018	GRADUATED	2018	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY EDUCATION	2018	2022	GRADUATED	2022	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	September 2, 2025
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[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)
	COMPUTER LITERACY		N/A		N/A
	SALES				
	CUSTOMER SERVICE				
	ACCOUNT MANAGEMENT				
	READING				
	HANDICRAFTS				
	DRAWING				

SIGNATURE		DATE	09/02/2025
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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> <hr/> <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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: center;"><u>RESIGN</u></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, as amended); and (c) Expanded Solo Parents Welfare Act (RA 11861), 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: 33%;">NAME</th> <th style="width: 33%;">OFFICE / RESIDENTIAL ADDRESS</th> <th style="width: 33%;">CONTACT NO. AND/OR EMAIL</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><b>RUTCHE M. PALEN</b></td> <td style="text-align: center;"><b>BAYBAY CITY</b></td> <td style="text-align: center;"><b>9350541892</b></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	OFFICE / RESIDENTIAL ADDRESS	CONTACT NO. AND/OR EMAIL	<b>RUTCHE M. PALEN</b>	<b>BAYBAY CITY</b>	<b>9350541892</b>						
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<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 style="padding: 2px;">           Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)  <b>PLEASE INDICATE ID Number and Date of Issuance</b> </td> </tr> <tr> <td style="padding: 2px;">           Government Issued ID: <b>PRC</b> </td> </tr> <tr> <td style="padding: 2px;">           ID/License/Passport No.: <b>2320835</b> </td> </tr> <tr> <td style="padding: 2px;">           Date/Place of Issuance: <b>05/06/2025</b> </td> </tr> </table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) <b>PLEASE INDICATE ID Number and Date of Issuance</b>	Government Issued ID: <b>PRC</b>	ID/License/Passport No.: <b>2320835</b>	Date/Place of Issuance: <b>05/06/2025</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; height: 100px;">  </td> </tr> <tr> <td style="text-align: center; padding: 2px;">           Signature (Sign inside the box)         </td> </tr> <tr> <td style="text-align: center; padding: 2px;">           Date Accomplished         </td> </tr> </table>		Signature (Sign inside the box)	Date Accomplished					
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<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p style="text-align: center;">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; padding: 10px; margin-top: 10px; text-align: center;"> <p style="color: red; font-size: small;">(wet signature/e-signature/digital certificate except for notary public)</p> <p style="margin-top: 10px;">Person Administering Oath</p> </div> </div> <div style="width: 35%; text-align: center;">  <p style="font-size: small;">PHOTO</p> <div style="border: 1px solid black; height: 100px; margin-top: 10px; width: 100%;"></div> <p style="font-size: small;">Right Thumbmark</p> </div> </div>													