

# 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	LANZADERAS			
FIRST NAME	JOSHUA	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	SABARES			
3. DATE OF BIRTH (mm/dd/yyyy)	07/28/2000	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	ORMOC CITY	If holder of dual citizenship, please indicate the details.		
5. SEX	<input checked="" type="checkbox"/> Male <input 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	857 ROW HOUSING House/Block/Lot No. Street PURAVILLE BAGONG BUHAY Subdivision/Village Barangay ORMOC LEYTE City/Municipality Province 6541	
7. HEIGHT (m)	1.70	18. PERMANENT ADDRESS	857 ROW HOUSING House/Block/Lot No. Street PURAVILLE BAGONG BUHAY Subdivision/Village Barangay ORMOC LEYTE City/Municipality Province 6541	
8. WEIGHT (kg)	70		ZIP CODE	6541
9. BLOOD TYPE	O		19. TELEPHONE NO.	N/A
10. GSIS ID NO.	N/A		20. MOBILE NO.	0927 736 5452
11. PAG-IBIG ID NO.	121338704261	21. E-MAIL ADDRESS (if any)	joshualanzaderas48@gmail.com	
12. PHILHEALTH NO.	13-250721673-4			
13. SSS NO.	064783502-3			
14. TIN NO.	646-823-133-00000			
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		NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME				
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	LANZADERAS			
FIRST NAME	JOSE	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	LEGITIMAS			
25. MOTHER'S MAIDEN NAME				
SURNAME	SABARES			
FIRST NAME	CLARA			
MIDDLE NAME	MUJERES			

## 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	SAN ISIDRO ELEMENTARY SCHOOL	ELEMENTARY	2007	2010	GRADE 3	N/A	3rd HONOR
	BAGONG BUHAY ELEMENTARY SCHOOL	ELEMENTARY	2010	2013	GRADE 6	2013	HONORABLE MENTIONED
SECONDARY	ORMOC CITY SENIOR HIGH SCHOOL	SENIOR HIGH	2017	2019	GRADE 12	2019	WITH HONORS
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	EASTERN VISAYAS STATE UNIVERSITY - ORMOC CITY CAMPUS	BACHELOR OF SCIENCE IN MECHANICAL ENGINEERING	2019	2023	GRADUATE	2023	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	May 16, 2024
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#### IV. CIVIL SERVICE ELIGIBILITY

[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]

*(Continue on separate sheet if necessary)*

<b>SIGNATURE</b>		<b>DATE</b>	16/05/2024
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S						
29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK	
		From	To			
	N/A	N/A	N/A	N/A	N/A	
(Continue on separate sheet if necessary)						
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED						
30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	BASIC FIRE DETECTION AND ALARM SYSTEM FOR MECHANICAL ENGINEERS	03-24-2024	03-24-2024	5 HRS	WEBINAR	PHILIPPINE SOCIETY OF MECHANICAL ENGINEERS - EMBO CHAPTER
	CARRER MAP OF A MECHANICAL ENGINEERS	04-16-2024	04-16-2024	5 HRS	WEBINAR	PHILIPPINE SOCIETY OF MECHANICAL ENGINEERS - NATIONAL
(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)	
	TECHNICAL DOCUMENTATION		N/A		PHILIPPINE SOCIETY OF MECHANICAL ENGINEERS - ORMOC-KANANGA CHAPTER	
	AUTOCAD				PHILIPPINE SOCIETY OF MECHANICAL ENGINEERS - NATIONAL	
	LEADERSHIP				PAMBANSANG SAMAHAN NG INHENYERONG MEKANIKAL	
	TEAM COLLABORATION					
	ANALYTICAL AND PROBLEM SOLVING					
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	16/05/2024	

<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>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>ENGR. MA. JODELLE C. BADILLA, ME</td> <td>ORMOC CITY</td> <td>0968 880 5831</td> </tr> <tr> <td>ENGR. RENOEL S. VILLASAN, ME</td> <td>MERIDA, LEYTE</td> <td>0927 082 1316</td> </tr> <tr> <td>ENGR. ALLAN LUKE G. JACINTO, ME</td> <td>CEBU CITY</td> <td>0995 326 0460</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	ENGR. MA. JODELLE C. BADILLA, ME	ORMOC CITY	0968 880 5831	ENGR. RENOEL S. VILLASAN, ME	MERIDA, LEYTE	0927 082 1316	ENGR. ALLAN LUKE G. JACINTO, ME	CEBU CITY	0995 326 0460		
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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>															
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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>															



PHOTO

JOSHUA S. LANZADERAS



Right Thumbmark