

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	TONGCO		
FIRST NAME	HAROLD		NAME EXTENSION (JR., SR)
MIDDLE NAME	ODI		
3. DATE OF BIRTH (mm/dd/yyyy)	September 15, 2000	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	San Francisco, Agusal Del Sur	If holder of dual citizenship, please indicate the details.	Philippines
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	House/Block/Lot No. Street San Roque Subdivision/Village Barangay Sogod Southern Leyte City/Municipality Province
7. HEIGHT (m)		ZIP CODE	6606
8. WEIGHT (kg)	41 kg	18. PERMANENT ADDRESS	House/Block/Lot No. Street San Roque Subdivision/Village Barangay Sogod Southern Leyte City/Municipality Province
9. BLOOD TYPE	B	ZIP CODE	6606
10. GSIS ID NO.	N.A	19. TELEPHONE NO.	N.A
11. PAG-IBIG ID NO.	N.A	20. MOBILE NO.	09069635325
12. PHILHEALTH NO.	13-251734915-5	21. E-MAIL ADDRESS (if any)	harold.tongco123@gmail.com

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
MIDDLE NAME	N.A		
OCCUPATION	N.A		
EMPLOYER/BUSINESS NAME	N.A		
BUSINESS ADDRESS	N.A		
TELEPHONE NO.	N.A		
24. FATHER'S SURNAME	TONGCO		
FIRST NAME	INOCENCIO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ARANAS		
25. MOTHER'S MAIDEN NAME	LORADEL CALIGDONG ODI		
SURNAME	ODI		
FIRST NAME	LORADEL		
MIDDLE NAME	CALIGDONG	(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	Sogod Central School	Elementary	2007	2013	Graduated	2013	None
SECONDARY	Southern Leyte States University - Main Campus	Secondary	2013	2019	Graduated	2019	None
VOCATIONAL / TRADE COURSE							
COLLEGE	Southern Leyte States University - Tomas Oppus	Bachelor of Secondary Education/ Social Studies	2019	2023	Graduated	2023	None
GRADUATE STUDIES	Southern Leyte States University - Tomas Oppus	Master of Arts in Education/ Social Studies	2024	2024	9		

(Continue on separate sheet if necessary)	
SIGNATURE	DATE
	December 12, 2024

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			
	Social Scient Socity	2019	2023		member	
	Philippine Association for Teachers and Educators	2023	present		member	
	Pyche-Graduate School Publication	2024	present		Editorial Cartoonist	
(Continue on separate sheet if necessary)						
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED						
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)						
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			
(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)	
	Poster Making (Drawing)		Naitonal Book Week (2016) Science Month (2016)		Special Program in the Arts	
	Editorial Cartoonist		Editorial Cartoonist (2024)		Psyche- Graduate School Official Publication	
(Continue on selete sheet if necessary)						
SIGNATURE					DATE	
					12/12/24	

<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 style="margin-left: 20px;">a. within the third degree?</p> <p style="margin-left: 20px;">b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details: _____</p>												
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p style="margin-left: 20px;">b. Have you been criminally charged before any court?</p>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details: _____</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <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 style="margin-left: 20px;">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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details: _____</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details: _____</p>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, please specify: _____</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, please specify ID No: _____</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <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: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>Maria Alma C. Tibon</td> <td>Rizal, Sogod, Southern Leyte</td> <td>9606625402</td> </tr> <tr> <td>Michael P. Doysabas</td> <td>Rizal, Sogod, Southern Leyte</td> <td>9563196433</td> </tr> <tr> <td>Mary Ann B. Cajes</td> <td>San Roque, Sogod, Southern Leyte</td> <td>9667431648</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Maria Alma C. Tibon	Rizal, Sogod, Southern Leyte	9606625402	Michael P. Doysabas	Rizal, Sogod, Southern Leyte	9563196433	Mary Ann B. Cajes	San Roque, Sogod, Southern Leyte	9667431648
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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> <div style="border: 1px solid black; width: 250px; height: 20px; margin: 10px auto; text-align: center;"> Person Administering Oath </div>													



PHOTO

