

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	PEÑAFIEL		
2. FIRST NAME	GRACE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	RICA		
3. DATE OF BIRTH (dd/mm/yyyy)	02/05/2000	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 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)	1.65	17. RESIDENTIAL ADDRESS	N/A House/Block/Lot No. Street LAWIS TABGAS Subdivision/Village Barangay ALBUERA LEYTE City/Municipality Province
8. WEIGHT (kg)	57	ZIP CODE	6542
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	N/A House/Block/Lot No. Street LAWIS TABGAS Subdivision/Village Barangay ALBUERA LEYTE City/Municipality Province
10. UMID ID NO.	06-4474963-3	ZIP CODE	6542
11. PAG-IBIG ID NO.	121307739766	19. TELEPHONE NO.	N/A
12. PHILHEALTH NO.	13-251905940-5	20. MOBILE NO.	09062459164
13. PhilSys Number (PSN):	4072-9138-6278-4523	21. E-MAIL ADDRESS (if any)	gracepenafielfs@gmail.com
14. TIN NO.	615-069-997-00000		
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 (dd/mm/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	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	PEÑAFIEL			
FIRST NAME	DANILO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	MALOLOY-ON			
25. MOTHER'S MAIDEN NAME				
SURNAME	RICA			
FIRST NAME	CORAZON			
MIDDLE NAME	LUNZAGA			

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 PEDRO ELEMENTARY SCHOOL	ELEMENTARY	2006	2012	GRADUATED	2012	WITH HONORS
SECONDARY	DR. GERONIMO B. ZALDIVAR MEMORIAL SCHOOL OF FISHERIES	SENIOR HIGH SCHOOL	2012	2018	GRADUATED	2018	WITH HONORS
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 - SOCIAL STUDIES	2018	2022	GRADUATED	2022	CUM LAUDE
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 24, 2025
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VOLUNTARY

VOLUNTARY

VOLUNTARY

VOLUNTARY

VOLUNTARY

VOLUNTARY

VOLUNTARY

(Continue on)

September 24, 2025

INCLUSIVE DATES
(dd/mm/yyyy)

NUMBER OF HOURS

POSITION / NATURE OF WORK

N/A

N/A

N/A

N/A

N/A

(Continue on separate sheet if necessary)

30.

INCLUSIVE DATES OF
ATTENDANCE
(dd/mm/yyyy)

NUMBER OF
HOURSType of L&D
(Managerial/
Supervisory/
Technical/etc)

CONDUCTED/ SPONSORED BY
(Write in full)

IN-SERVICE TRAINING ON HIGHER ORDER THINKING SKILLS AND GENDER AND DEVELOPMENT

25/11/2024

29/11/2024

40.0

TECHNICAL

ALBUERA PRIVATE HIGH SCHOOL, INC.

THE TEACHER AS A PROFESSIONAL

13/7/2024

13/7/2024

6.0

TECHNICAL

PHILIPPINE ASSOCIATION FOR TEACHERS AND
EDUCATORS

DATA ANALYTICS ESSENTIALS

7/9/2025

12/9/2025

30.0

TECHNICAL

CISCO NETWORKING ACADEMY

(Continue on separate sheet if necessary)

31.

32

1

READING

N/A

**PHILIPPINE ASSOCIATION FOR TEACHERS
AND EDUCATORS**

CROCHETING



ANNOTATING

(Continue on separate sheet if necessary)

SIGNATURE

DATE _____

September 24, 2025

<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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>I'VE RESIGNED FROM MY PREVIOUS JOBS FORMALLY.</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>JAY C. BANSAL</td> <td>VISCA, BAYBAY CITY, LEYTE</td> <td>09489762630</td> </tr> <tr> <td>RUTCHE M. PALEN</td> <td>BAYBAY CITY, LEYTE</td> <td>09350541892</td> </tr> <tr> <td>ALERA M. ROSAL</td> <td>SAN PEDRO, ALBUERA, LEYTE</td> <td>09062035877</td> </tr> </tbody> </table>		NAME	OFFICE / RESIDENTIAL ADDRESS	CONTACT NO. AND/OR EMAIL	JAY C. BANSAL	VISCA, BAYBAY CITY, LEYTE	09489762630	RUTCHE M. PALEN	BAYBAY CITY, LEYTE	09350541892	ALERA M. ROSAL	SAN PEDRO, ALBUERA, LEYTE	09062035877
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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>													
<p>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</p> <p>PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: PRC</p> <p>ID/License/Passport No.: 2187842</p> <p>Date/Place of Issuance: ORMOG CITY</p>	<div style="border: 1px solid black; padding: 5px; text-align: center;">  Signature (Sign inside the box) Date Accomplished: 24 SEP 2025 </div> <div style="border: 1px solid black; padding: 5px; text-align: center;">  Right Thumbmark </div>												
<p>SUBSCRIBED AND SWORN to before me this <u>24 SEP 2025</u> affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; padding: 10px; text-align: center; margin-top: 10px;"> <p>ATTY. CLINT OCTAVIUS E. LABTIC Public Attorney II PRC Administering Oath</p> </div>													