

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	BARBOSA		
FIRST NAME	MARTIN	NAME EXTENSION (JR., SR)	
MIDDLE NAME	BA-AY		
3. DATE OF BIRTH (mm/dd/yyyy)	1/5/1987	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	LIBAGON, SO. LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6 CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:		
7. HEIGHT (m)	1.63	17. RESIDENTIAL ADDRESS	ZONE 6
8. WEIGHT (kg)	84		House/Block/Lot No.
9. BLOOD TYPE	O		Street
10. GSIS ID NO.	N/A		BRGY. GUADALUPE
11. PAG-IBIG ID NO.	121243331140	18. PERMANENT ADDRESS	Subdivision/Village
12. PHILHEALTH NO.	132012184682		Barangay
13. SSS NO.	N/A		BAYBAY CITY
14. TIN NO.	482640979		LEYTE
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	martinbbarbosa@gmail.com
		20. MOBILE NO.	0905354224
		19. TELEPHONE NO.	
		ZIP CODE	6521
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II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	BARBOSA		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	RACHELLE ANN	NAME EXTENSION (JR., SR)	RALPH MARTIN A. BARBOSA	2/23/2009
MIDDLE NAME	ADIGUE		RICK MARTIN A. BARBOSA	9/25/2011
OCCUPATION	HOUSEWIFE			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	9488405143			
24. FATHER'S SURNAME	BARBOSA			
FIRST NAME	MARCELINO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	MENDEZ			
25. MOTHER'S MAIDEN NAME	ELEUTERIA P. PA-ANGAY			
SURNAME	BARBOSA			
FIRST NAME	ELEUTERIA			
MIDDLE NAME	PA-ANGAY		(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	GUADALUPE ELEMENTARY SCHOOL	PRIMARY EDUCATION	1997	2001	N/A	2001	N/A
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	HIGH SCHOOL	2003	2007	N/A	2007	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BS ANIMAL SCIENCE	2012	2016	N/A	2016	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	August 28, 2025
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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.

23	INCLUSIVE DATES				SALARY/ JOB/ PAY		
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[illegible]

(Continue on separate sheet if necessary)

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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		
	KABALIKAT CIVICOM-BAYBAY CITY CHAPTER	2020	PRESENT	N/A	VOLUNTEER
	LAY MINISTER/HOLY SPIRIT PARISH	2015	2018	N/A	N/A

(Continue on separate sheet if necessary)

[illegible][illegible]

(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)
COOKING	N/A	KABALIKAT CIVICOM
DRIVING		LEYTE UNITED BELGIAN ASSOCIATION
PLUMBING		
CARPENTRY		
ELECTRICAL		

(Continue on separate sheet if necessary)

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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? <input type="checkbox"/> YES</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)? <input type="checkbox"/> YES</p>	<p><input checked="" type="checkbox"/> NO</p> <p><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? <input type="checkbox"/> YES</p> <p>b. Have you been criminally charged before any court? <input type="checkbox"/> YES</p>	<p><input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><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? <input type="checkbox"/> YES</p>	<p><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? <input type="checkbox"/> YES</p>	<p><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)? <input type="checkbox"/> YES</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? <input type="checkbox"/> YES</p>	<p><input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><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? <input type="checkbox"/> YES</p>	<p><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? <input type="checkbox"/> YES</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input checked="" type="checkbox"/> NO</p> <p><input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p>If YES, please specify ID 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%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>REV.FR. DENNIS M. CAGANTAS</td> <td>MACROHON SO. LEYTE</td> <td>9771898814</td> </tr> <tr> <td>CYNTHIA DOLORES V. GODOY</td> <td>VISCA, BAYBAY CITY, LEYTE</td> <td>9271285805</td> </tr> <tr> <td>VILMA C. PATINDOL</td> <td>GABAS, BAYBAY CITY, LEYTE</td> <td>9178628641</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	REV.FR. DENNIS M. CAGANTAS	MACROHON SO. LEYTE	9771898814	CYNTHIA DOLORES V. GODOY	VISCA, BAYBAY CITY, LEYTE	9271285805	VILMA C. PATINDOL	GABAS, BAYBAY CITY, LEYTE	9178628641			
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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: 300px; height: 60px; margin: 10px auto;"></div> <div style="text-align: center; margin-top: 5px;">Person Administering Oath</div>																