

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	DAVID		
FIRST NAME	NOESSA		NAME EXTENSION (JR., SR)
MIDDLE NAME	CAMPOMANES		
3. DATE OF BIRTH (mm/dd/yyyy)	3/6/1997	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input checked="" type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	BAYBAY LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<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:	17. RESIDENTIAL ADDRESS	N/A Zone 4 House/Block/Lot No. Street N/A Barangay Pangasugan Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
7. HEIGHT (m)	1.4478	ZIP CODE	6521
8. WEIGHT (kg)	50 kg	18. PERMANENT ADDRESS	N/A Zone 4 House/Block/Lot No. Street N/A Barangay Guadalupe Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
9. BLOOD TYPE	NOT YET KNOWN	ZIP CODE	6521
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	1212-2973-4043	20. MOBILE NO.	09983267633
12. PHILHEALTH NO.	13-250367792-3	21. E-MAIL ADDRESS (if any)	noessadavid06@gmail.com
13. SSS NO.	34-7727062-2		
14. TIN NO.	353-247-220		
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	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	DAVID			
FIRST NAME	WILBERT	NAME EXTENSION (JR., SR)		
MIDDLE NAME	DATA			
25. MOTHER'S MAIDEN NAME				
SURNAME	CAMPOMANES			
FIRST NAME	PERLITA			
MIDDLE NAME	BANDILLA		(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	VISCA FOUNDATION ELEMENTARY SCHOOL	N/A	7/1/2003	3/1/2009	N/A	2009	NONE
SECONDARY	VISAYAS STATE UNIVERSITY-LABORATORY HIGH SCHOOL	N/A	7/1/2009	3/1/2013	N/A	2013	NONE
VOCATIONAL /	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BS IN AGRIBUSINESS	7/1/2014	3/1/2018	N/A	2018	NONE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	June 15, 2022
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[illegible]

V. WORK EXPERIENCE
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

SIGNATURE		DATE	JUNE 15, 2022
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[illegible]

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

	INCLUSIVE DATES OF		Type of ID	
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[illegible]

VIII. OTHER INFORMATION

MEMBERSHIP IN ASSOCIATION/ORGANIZATION		

31.	SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	COMMUNICATION SKILLS	TEAMMATE OF THE MONTH	CATHOLIC YOUTH UNITED FOR TRUTH
	COMPUTER PROFICIENCY		CATHOLIC WOMEN'S LEAGUE
	PUBLIC SPEAKING		
	CUSTOMER SERVICE SKILLS		
	INTERPERSONAL SKILLS		
	ADMINISTRATIVE SKILLS		
	MARKETING		

SIGNATURE		DATE	JUNE 15, 2022
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JUNE 15, 2022

<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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>ANATOLIO N. POLINAR</td> <td>VISCA, BAYBAY CITY, LEYTE</td> <td>563-7552</td> </tr> <tr> <td>DENNIS P. PEQUE</td> <td>BRGY. PANGASUGAN, BAYBAY CITY, LEYTE</td> <td>563-7552</td> </tr> <tr> <td>CLARA P. MERCADO</td> <td>BRGY. GUADALUPE, BAYBAY CITY, LEYTE</td> <td></td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	ANATOLIO N. POLINAR	VISCA, BAYBAY CITY, LEYTE	563-7552	DENNIS P. PEQUE	BRGY. PANGASUGAN, BAYBAY CITY, LEYTE	563-7552	CLARA P. MERCADO	BRGY. GUADALUPE, BAYBAY CITY, LEYTE	
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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 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; width: 300px; margin: 10px auto; height: 60px; position: relative;"> <div style="position: absolute; bottom: 5px; left: 50%; transform: translateX(-50%);"> Person Administering Oath </div> </div>													
<div style="text-align: center;"> <p>PHOTO</p> <div style="border: 1px solid black; width: 150px; height: 100px; margin: 10px auto;"></div> <p>Right Thumbmark</p> </div>													