

PERSONAL DATA SHEET

WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative 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.

I. PERSONAL INFORMATION

2. SURNAME*	JAVIER		
FIRST NAME*	MARIFE		
MIDDLE NAME*	BUTCON		
3. DATE OF BIRTH* (mm/dd/yyyy)	08/22/1998	16. CITIZENSHIP*	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/>
4. PLACE OF BIRTH*	SOGOD, SOUTHERN 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	House/Block/Lot No. Magcapatag Subdivision/Village* San Francisco, Camotes City/Municipality*
7. HEIGHT (m)*	1.549	ZIP CODE*	
8. WEIGHT (kg)*	45		
9. BLOOD TYPE*	O	18. PERMANENT ADDRESS	House/Block/Lot No. Subdivision/Village* Sogod City/Municipality*
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	1212-9095-1012		
12. PHILHEALTH NO.	12-025888221-6		
13. SSS NO.	35-1302219-0	19. TELEPHONE NO.	
14. TIN NO.	603-216-004-000	20. MOBILE NO.* (Ex. 09991234567)	095
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	APINGJAVIE

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	
MIDDLE NAME			
OCCUPATION			
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME*	JAVIER		
FIRST NAME*	AURELIO	NAME EXTENSION (JR., SR)	
		SR	

MIDDLE NAME*	JOVEN	
25. MOTHER'S MAIDEN NAME*	ROSALINDA WENCESLAO BUTCON	
SURNAME*	JAVIER	
FIRST NAME*	ROSALINDA	
MIDDLE NAME*	BUTCON	(Continue on sep

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE	
			From	To
ELEMENTARY*	CONCEPCION ELEMENTARY SCHOOL	GRADE 6	2005	2011
SECONDARY*	CAMOTES HILLSIDE ACADEMY INC.	4TH YEAR HIGH SCHOOL	2011	2015
VOCATIONAL /	N/A			
COLLEGE	UNIVERSITY OF CEBU-MAIN	BS CUSTOMS ADMINISTRATION	2015	2019
GRADUATE STUDIES	N/A			

(Continue on separate sheet if necessary)

SIGNATURE		DATE
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/criminal case/s against the person

(Do not fill up. For CSC use only)

NAME EXTENSION (JR., SR)

Dual Citizenship
☐ by birth ☐ by naturalization
Pls. indicate country:

Street *

Southern Poblacion

Barangay *

Cebu

Province *

6050

Purok Narra

Street *

LP Concepcion

Barangay *

Southern Leyte

Province *

6606

N/A

19931817

ER@GMAIL.COM

list all)

DATE OF BIRTH (mm/dd/yyyy)

