

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 | TRIGOSA | | |
| FIRST NAME | TRISHA MARIEL | | NAME EXTENSION (JR., SR) |
| MIDDLE NAME | BERAY | | |
| 3. DATE OF BIRTH (mm/dd/yyyy) | 10/10/2000 | 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 | CARIDAD, BAYBAY CITY | 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 | 692 SABAS AVILA ST. House/Block/Lot No. Street N/A BRGY. CARIDAD Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province |
| 7. HEIGHT (m) | 1.57 m | ZIP CODE | |
| 8. WEIGHT (kg) | 49 kg | | |
| 9. BLOOD TYPE | A+ | 18. PERMANENT ADDRESS | 692 SABAS AVILA ST. House/Block/Lot No. Street N/A BRGY. CARIDAD Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province |
| 10. GSIS ID NO. | - | ZIP CODE | 6521 |
| 11. PAG-IBIG ID NO. | 121327167321 | 19. TELEPHONE NO. | N/A |
| 12. PHILHEALTH NO. | 13-252942315-6 | 20. MOBILE NO. | 09158662551 |
| 13. SSS NO. | 64-4648240-6 | 21. E-MAIL ADDRESS (if any) | ttrigosa@gmail.com |
| 14. TIN NO. | - | | |
| 15. AGENCY EMPLOYEE NO. | N/A | | |

II. FAMILY BACKGROUND

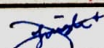
| | | | | |
|--------------------------|-------------|--------------------------|---|----------------------------|
| 22. SPOUSE'S SURNAME | N/A | | 23. NAME of CHILDREN (Write full name and list all) | DATE OF BIRTH (mm/dd/yyyy) |
| FIRST NAME | N/A | NAME EXTENSION (JR., SR) | N/A | |
| MIDDLE NAME | N/A | | | |
| OCCUPATION | N/A | | | |
| EMPLOYER/BUSINESS NAME | N/A | | | |
| BUSINESS ADDRESS | N/A | | | |
| TELEPHONE NO. | N/A | | | |
| 24. FATHER'S SURNAME | TRIGOSA | | | |
| FIRST NAME | CELSO | NAME EXTENSION (JR., SR) | | |
| MIDDLE NAME | CABUGWASON | | | |
| 25. MOTHER'S MAIDEN NAME | | | | |
| SURNAME | BERAY | | | |
| FIRST NAME | MARIA LOINA | | | |
| MIDDLE NAME | ASUNTO | | | |

(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 | LIBERTY CHRISTIAN SCHOOL FOUNDATION | PRIMARY | 2007 | 2013 | | 2013 | VALEDICTORIAN |
| SECONDARY | VISAYAS STATE UNIVERSITY INTEGRATED HIGH SCHOOL | SENIOR HIGH SCHOOL | 2013 | 2019 | | 2019 | WITH HONORS |
| VOCATIONAL / TRADE COURSE | N/A | N/A | N/A | N/A | | N/A | N/A |
| COLLEGE | VISAYAS STATE UNIVERSITY | BS BIOLOGY MAJOR IN ECOLOGY | 2019 | 2023 | | 2023 | DOST SCHOLAR/ CUM LAUDE |
| GRADUATE STUDIES | N/A | N/A | N/A | N/A | | N/A | N/A |

(Continue on separate sheet if necessary)

| | | | |
|-----------|---|------|------------|
| SIGNATURE |  | DATE | 01/20/2025 |
|-----------|---|------|------------|

| VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/ TRAINING PROGRAMS ATTENDED | |
|---|--|
| 1. Name of the Program | |
| 2. Description of the Program | |
| 3. Date of Completion | |
| 4. Duration of the Program | |
| 5. Location of the Program | |
| 6. Sponsor/ Provider of the Program | |
| 7. Key Personnel Involved | |
| 8. Key Findings/ Outcomes | |
| 9. Recommendations/ Next Steps | |
| 10. Other Comments | |

(Continue on separate sheet if necessary)

FV

(Continue on separate sheet if necessary)

| | | | |
|--|--|------|------------|
| | | DATE | 01/20/2025 |
|--|--|------|------------|

CS FORM 212 (Revised 2017), Page 3 of 4

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,
a. within the third degree?
b. within the fourth degree (for Local Government Unit - Career Employees)?

☐ YES ☒ NO
☐ YES ☒ NO
If YES, give details: _____

35. a. Have you ever been found guilty of any administrative offense?
b. Have you been criminally charged before any court?

☐ YES ☒ NO
If YES, give details: _____
☐ YES ☒ NO
If YES, give details: _____
Date Filed: _____
Status of Case/s: _____

36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?

☐ YES ☒ NO
If YES, give details: _____

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?

☐ YES ☒ NO
If YES, give details: _____

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?
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?

☐ YES ☒ NO
If YES, give details: _____
☐ YES ☒ NO
If YES, give details: _____

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES ☒ NO
If YES, give details (country): _____

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:
a. Are you a member of any indigenous group?
b. Are you a person with disability?
c. Are you a solo parent?

☐ YES ☒ NO
If YES, please specify: _____
☒ YES ☐ NO
If YES, please specify ID No: 083708000-2584
☐ YES ☒ NO
If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)

| NAME | ADDRESS | TEL. NO. |
|----------------------------|-----------------------------|------------|
| REV. FR. JEROME T. DEJARME | BRGY. CARIDAD, BAYBAY CITY | 9776376163 |
| JUDY AN I. SIMPRON | BRGY. POMPONAN, BAYBAY CITY | 9365583065 |
| JASPER PAUL A. YCOY | BRGY. MAKINHAS, BAYBAY CITY | 9606647958 |

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.



TRISHA MARIE B. TRISORA

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: SSS

ID/License/Passport No: 08-4648240-8

Date/Place of Issuance: 08/15/2023/APPLICATION THRU WEB

Signature (Sign inside the box)
Date Accomplished: 01/20/2025



SUBSCRIBED AND SWORN to before me this

JAN 20 2025

ATTY. EDEN B. CHAVEZ-BUTAWAN

Notary Public for the Province of Leyte, City of Baybay

Notarial Commission No. B-23-12-07

Until December 31, 2025

MCLE Compliance No. VIII-0011446-Valid until April 14, 2028

PTR No. Bc0326357, 01/02/25

IBP-OR No. 402541-01/02/25

TIN No. 207-625-025

Attorney's Roll No. 42391

R. Magaraya Avenue, Baybay City, Leyte

Doc. No. 221
Page No. 47
Book No. 1544
Series of 25