

## 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	SAOY		
FIRST NAME	SYLVIA	N/A	
MIDDLE NAME	CABALUNA		
3. DATE OF BIRTH (mm/dd/yyyy)	06/19/1993	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	MAC ARTHUR LEYTE	If holder of dual citizenship, please indicate the details.	Philippines
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 House/Block/Lot No. Street N/A RUMUALDEZ Subdivision/Village Barangay MAC ARTHUR LEYTE City/Municipality Province
7. HEIGHT (m)	5'0	18. PERMANENT ADDRESS	N/A House/Block/Lot No. Street N/A RUMUALDEZ Subdivision/Village Barangay MAC ARTHUR LEYTE City/Municipality Province
8. WEIGHT (kg)	53	ZIP CODE	6509
9. BLOOD TYPE	O	19. TELEPHONE NO.	N/A
10. GSIS ID NO.	NA	20. MOBILE NO.	09126164113
11. PAG-IBIG ID NO.	NA	21. E-MAIL ADDRESS (if any)	<a href="mailto:sylvia.saoy19@gmail.com">sylvia.saoy19@gmail.com</a>
12. PHILHEALTH NO.	13-025220592-7		
13. SSS NO.	NA		
14. TIN NO.	456-406-821		
15. AGENCY EMPLOYEE NO.	NA		

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	NA		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NA	N/A	STEVEN JAZZ SAOY	02/14/2016
MIDDLE NAME	NA			
OCCUPATION	NA			
EMPLOYER/BUSINESS NAME	NA			
BUSINESS ADDRESS	NA			
TELEPHONE NO.	NA			
24. FATHER'S SURNAME	SAOY			
FIRST NAME	CRISANTO	N/A		
MIDDLE NAME	BELLEZA			
25. MOTHER'S MAIDEN NAME	TERESITA GASPAY CABALUNA			
SURNAME	CABALUNA			
FIRST NAME	TERESITA			
MIDDLE NAME	GASPAY			

(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)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	DANAO ELEMENTARY SCHOOL	PRIMARY EDUCATION	1999	2006	GRADUATED	2006	N/A
SECONDARY	MAC ARTHUR NATIONAL HIGH SCHOOL	SECONDARY EDUCATION	2006	2010	GRADUATED	2010	N/A
VOCATIONAL / TRADE COURSE	VISAYAS CRISTIAN INSTITUTE OF TECHNOLOGY	TESDA	2011	2014	GRADUATED	2014	N/A
COLLEGE	ABUYOG COMMUNITY COLLEGE	BACHELOR ELEMENTARY EDUCATION	2017	2021	GRADUATED	2022	N/A
GRADUATE STUDIES	Asian Development Foundation College	Master of Education Major in SPED	2024	PRESENT	9 units	NA	NA

(Continue on separate sheet if necessary)

SIGNATURE		DATE	03-06-24
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27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	<b>BOARD PASSER LICENSURE EXAMINATION FOR TEACHER</b>	<b>77.0</b>	<b>MARCH 19,2023</b>	<b>TACLOBAN CITY</b>	<b>2056472</b>	<b>06/19/2026</b>
		<b>"NOTHING</b>	<b>FOLLOWS"</b>			
	<b>N/A</b>					
	<b>N/A</b>					
	<b>NA</b>					
	<b>N/A</b>					
	<b>N/A</b>					

## V. WORK EXPERIENCE

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

[illegible]

<b>SIGNATURE</b>		<b>DATE</b>	03-06-24
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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			
NA		N/A	N/A	N/A	N/A	
NA						
NA						
NA						
NA						
NA						
NA						
(Continue on separate sheet if necessary)						
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED						
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)						
30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	PRACTICE TEACHING	03/23/2021	06/11/2022	460 HRS	Technical	JAVIER CENTRAL SCHOOL
	CARPENTRY NC II	07/29/2023	09/18/2023	301	Technical	Technical Ecuc. And Skill Dev. Authority
		"NOTHING FOLLOWS"				
NA						
NA						
NA						
NA						
NA						
NA						
NA						
NA						
NA						
NA						
NA						
NA						
NA						
NA						
NA						
NA						
(Continue on separate sheet if necessary)						
VIII. OTHER INFORMATION						
31.	SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)		33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
	COMPUTER LITERATE	N/A			N/A	
	NA	N/A			N/A	
	NA	N/A			N/A	
	NA	N/A			N/A	
	NA	N/A			N/A	
	NA	N/A			N/A	
	NA	N/A			N/A	
	NA	N/A			N/A	
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	03-04-24	

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person who has immediate supervision over you in the 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?  
☐ YES ☒ NO  
If YES, give details: \_\_\_\_\_  
b. Have you been criminally charged before any court?  
☐ 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)?  
☐ YES ☒ NO  
If YES, give details: \_\_\_\_\_  
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: \_\_\_\_\_

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  
a. Are you a member of any indigenous group?  
☐ YES ☒ NO  
If YES, please specify: \_\_\_\_\_  
b. Are you a person with disability?  
☐ YES ☒ NO  
If YES, please specify ID No: \_\_\_\_\_  
c. Are you a solo parent?  
☐ YES ☒ NO  
If YES, please specify ID No: \_\_\_\_\_

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

NAME	ADDRESS	TEL. NO.
HON. JARED MILAR	BRGY DANA O MAC ARTHUR LEYTE	9123057708
HON. ARMIE ANN M, MALQUISTO	BRGY DANA O MAC ARTHUR LEYTE	9203955738
HON. BEDE MUNDALA	BGRY RUMUALDEZ MAC. LEYTE	910658280

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.



SYLVIA C. SAOY

PHOTO

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)

PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: PRC ID

ID/License/Passport No.: 2056472

Date/Place of Issuance: 06/16/2023 TACLOBAN CITY

Signature (Sign inside the box)

03-06-24

Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this

affiant exhibiting his/her validly issued government ID as indicated above.

JUL. NO. 132  
PAGE NO. 41  
BOOK NO. XII  
SERIES OF 2025

Person Administering Oath  
JAVIER ABLAYOG, and the Province of Leyte  
COMMISSION NO. 11-24-03  
UNTIL DECEMBER 31, 2025  
2nd FLOOR, MAIN PLAZA Bldg., 2nd DIST. # MACARTHUR LEYTE  
P.O. NO. 47704, TACLOBAN CITY  
P.T. NO. 9591937, 11-19-2024, Mac. Leyte  
M.L.C. EX. NO. 11-19-2024, Mac. Leyte

SIGNATURE