

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

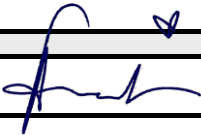
2. SURNAME	SACEDON				
FIRST NAME	ANALIE			NAME EXTENSION (JR., SR)	
MIDDLE NAME	ODIAS				
3. DATE OF BIRTH (mm/dd/yyyy)	07/17/2000	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:		
4. PLACE OF BIRTH	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			
7. HEIGHT (m)	1.62	ZIP CODE	House/Block/Lot No. Street		
8. WEIGHT (kg)	48		GUADALUPE		
9. BLOOD TYPE			Subdivision/Village Barangay		
10. GSIS ID NO.			BAYBAY LEYTE		
11. PAG-IBIG ID NO.			City/Municipality Province		
12. PHILHEALTH NO.		18. PERMANENT ADDRESS			
13. SSS NO.		ZIP CODE	House/Block/Lot No. Street		
14. TIN NO.			GUADALUPE		
15. AGENCY EMPLOYEE NO.			Subdivision/Village Barangay		
			BAYBAY LEYTE		
			City/Municipality Province		
		19. TELEPHONE NO.			
		20. MOBILE NO.	+639682167371		
		21. E-MAIL ADDRESS (if any)	analieodiassacedon@gmail.com		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	SACEDON			
FIRST NAME	MARLON	NAME EXTENSION (JR., SR)		
MIDDLE NAME	FLORES			
25. MOTHER'S MAIDEN NAME	GELIO			
SURNAME	SACEDON			
FIRST NAME	MERCEDITA			
MIDDLE NAME	ODIAS		(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 ELEMTRY SCHOOL					2013	With Honors
SECONDARY	VISAYAS STATE UNIVERSITY INTEGRATED HIGH SCHOOL	SCIENCE, TEACHNOLOGY, ENGINEERING AND MATHEMATICS				2019	
VOCATIONAL / TRADE COURSE							

COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY EDUCATION MAJOR IN SCIENCE				2023	CUM LAUDE
GRADUATE STUDIES							
<i>(Continue on separate sheet if necessary)</i>							
SIGNATURE			DATE		August 4, 2023		

[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	August 4, 2023
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[illegible]

(Continue on separate sheet if necessary)

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

[illegible]

(Continue on separate sheet if necessary)

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Video Editing	Summer Job in PhilHealth Baybay	League of Science Majors
Digital Drawing/Painting/Designing		
Writing		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	August 4, 2023
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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?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input 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> <hr/> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">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: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>Kristine S. Lombardi</td> <td>30 de Diciembre St., Baybay City, Leyte</td> <td></td> </tr> <tr> <td>Joy A. Bellen</td> <td>Department of Teacher Education, ViSCA, Baybay City, Leyte</td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Kristine S. Lombardi	30 de Diciembre St., Baybay City, Leyte		Joy A. Bellen	Department of Teacher Education, ViSCA, Baybay City, Leyte					<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p>ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size)</p> <p>With full and handwritten name tag and signature over printed name</p> <p>Computer generated or photocopied picture is not acceptable</p> </div> <p>PHOTO</p> <div style="border: 1px solid black; height: 100px; width: 100%; margin-top: 10px;"></div> <p style="text-align: center;">Right Thumbmark</p>	
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Joy A. Bellen	Department of Teacher Education, ViSCA, Baybay City, Leyte														
<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>															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td colspan="2">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID:</td> <td>Philippine Identification Card</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>2174-0286-9809-3207</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>04/01/2022</td> </tr> </table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)		PLEASE INDICATE ID Number and Date of Issuance		Government Issued ID:	Philippine Identification Card	ID/License/Passport No.:	2174-0286-9809-3207	Date/Place of Issuance:	04/01/2022	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 100px; text-align: center; vertical-align: middle;"> </td> </tr> <tr> <td style="text-align: center;">Signature (Sign inside the box)</td> </tr> <tr> <td style="text-align: center;">August 4, 2023</td> </tr> <tr> <td style="text-align: center;">Date Accomplished</td> </tr> </table>		Signature (Sign inside the box)	August 4, 2023	Date Accomplished
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Date Accomplished															
<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; height: 60px; width: 100%; margin-top: 10px;"></div> <p style="text-align: center;">Person Administering Oath</p>															