

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 (☐ nd 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	JACOB				
FIRST NAME	LUCIANO			JR	
MIDDLE NAME	RODRIGUEZ				
3. DATE OF BIRTH (mm/dd/yyyy)	01/02/1978	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:		
4. PLACE OF BIRTH	BRGY. ANAKAN, GINGOOG CITY, MISAMIS ORIENTAL		Philippines		
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female				
6 CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married	17. RESIDENTIAL ADDRESS ZIP CODE	Zone 6		
	<input type="checkbox"/> Widowed <input type="checkbox"/> Separated		House/Block/Lot No. GUADALUPE		
<input type="checkbox"/> Other/s:	Subdivision/Village BARANGAY				
7. HEIGHT (m)	1.80		BAYBAY LEYTE		
8. WEIGHT (kg)	75		City/Municipality Province		
9. BLOOD TYPE	'O"	18. PERMANENT ADDRESS ZIP CODE	ZONE 6		
10. GSIS ID NO.	NONE		House/Block/Lot No. Street		
11. PAG-IBIG ID NO.	1212-974-3827		GUADALUPE BARANGAY		
12. PHILHEALTH NO.	13-025228136-4		Subdivision/Village BARANGAY		
13. SSS NO.	NONE		BAYBAY LEYTE		
14. TIN NO.	607-840-913	19. TELEPHONE NO.	(053)-563-8627		
15. AGENCY EMPLOYEE NO.	NONE	20. MOBILE NO.	09533502893		
		21. E-MAIL ADDRESS (if any)	junjacobe02@gmail.com		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	JACOB		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	JOVELYN		BRETT YVONNE G. JACOB	06/04/2011
MIDDLE NAME	GOFREDO			
OCCUPATION	SCIENCE RESEARCH ASSISTANT			
EMPLOYER/BUSINESS NAME	VSU			
BUSINESS ADDRESS	BARANGAY PANGASUGAN, BAYBAY CITY, LEYTE			
TELEPHONE NO.	9533502893			
24. FATHER'S SURNAME	JACOB			
FIRST NAME	LUCIANO	SR.		
MIDDLE NAME	TULAYTAY			
25. MOTHER'S MAIDEN NAME	RODRIGUEZ			
SURNAME	JACOB			
FIRST NAME	SARAH			
MIDDLE NAME	TUTO		(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	ANAKAN ELEMENTARY SCHOOL	Primary Education	1986	1992	Certificate	1992	N/A
SECONDARY	MALIBUD NATINAL HIGH SCHOOL	High School	1992	1996	Diploma	1996	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	UNIVERSITY OF MINDANAO	BACHELOR OF SCIENCE IN CRIMINOLOGY	1999	2004	Diploma	2004	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	June 17, 2025
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IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

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

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	June 17, 2025
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<p>34. Are you related by consanguinity or affinity to the appointing or recommending chief of bureau or office or to the person who has immediate supervision over you in 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> <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 style="text-align: right;">If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p style="text-align: right;">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>ELWIN JAY YU</td> <td>VSU, HOSPITAL</td> <td></td> </tr> <tr> <td>LUZ O. MORENO</td> <td>NARC, VSU</td> <td>9164239381</td> </tr> <tr> <td>ALLEN LAMBERT</td> <td>DBM, VSU</td> <td></td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	ELWIN JAY YU	VSU, HOSPITAL		LUZ O. MORENO	NARC, VSU	9164239381	ALLEN LAMBERT	DBM, VSU		
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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>														
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> <td style="padding: 2px;">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td style="padding: 2px;">Government Issued ID:</td> <td style="padding: 2px;">DRIVER'S LICENSE</td> </tr> <tr> <td style="padding: 2px;">ID/License/Passport No.:</td> <td style="padding: 2px;">H-12-18-000809</td> </tr> <tr> <td style="padding: 2px;">Date/Place of Issuance:</td> <td style="padding: 2px;">BAYBAY CITY, LEYTE</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:	DRIVER'S LICENSE	ID/License/Passport No.:	H-12-18-000809	Date/Place of Issuance:	BAYBAY CITY, LEYTE	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 80px; 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;">June 17, 2025</td> </tr> <tr> <td style="text-align: center;">Date Accomplished</td> </tr> </table>		Signature (Sign inside the box)	June 17, 2025	Date Accomplished	<div style="text-align: center;"> <p>PHOTO</p> </div> <div style="border: 1px solid black; height: 100px; margin-top: 10px;"></div> <div style="text-align: center; margin-top: 5px;">Right Thumbmark</div>
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June 17, 2025														
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; width: 200px; margin: 10px auto; height: 30px; display: flex; align-items: center; justify-content: center;"> <p>Person Administering Oath</p> </div>														