

# 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	KINTANAR		
FIRST NAME	PORTIA LYN		NAME EXTENSION (Jr., Sr.) N/A
MIDDLE NAME	BALTAZAR		
3. DATE OF BIRTH (mm/dd/yyyy)	01/19/2000	16. CITIZENSHIP	<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	CEBU CITY	If holder of dual citizenship, please indicate the details:	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	Philippines	
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Separated	17. RESIDENTIAL ADDRESS	0 _____ House/Block/Lot No. _____ Street _____ N/A _____ BUNGA _____ Subdivision/Village _____ Barangay _____ BAYBAY CITY _____ LEYTE _____ City/Municipality _____ Province _____
7. HEIGHT (in)		ZIP CODE	6521
8. WEIGHT (kg)	55 KG	18. PERMANENT ADDRESS	CAMBATUAN _____ N/A _____ House/Block/Lot No. _____ Street _____ N/A _____ BUNGA _____ Subdivision/Village _____ Barangay _____ BAYBAY CITY _____ LEYTE _____ City/Municipality _____ Province _____
9. BLOOD TYPE	B+	ZIP CODE	6521
10. GISS ID NO.	N/A	19. TELEPHONE NO.	N/A
11. PAG-BIGID NO.	N/A	20. MOBILE NO.	09388421610
12. PHILHEALTH NO.	13-025559238-7	21. E-MAIL ADDRESS (if any)	portialynk@gmail.com

## II. FAMILY BACKGROUND

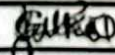
22. SPOUSE'S SURNAME	N/A	N/A	23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (Jr., Sr.)	KELSEY SUMMER K. RANOLA	12/22/2020
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	KINTANAR	N/A		
FIRST NAME	FERDINAND	NAME EXTENSION (Jr., Sr.)		
MIDDLE NAME	AGURA			
25. MOTHER'S MAIDEN NAME	BALTAZAR			
SURNAME	BALTAZAR			
FIRST NAME	VENUS			
MIDDLE NAME	CALA			

(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 ELEMENTARY SCHOOL	PRIMARY EDUCATION	2007	2012	N/A	2012	N/A
SECONDARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION	SECONDARY EDUCATION	2012	2016	N/A	2016	N/A
	VISAYAS STATE UNIVERSITY BENIGNO HIGH SCHOOL	SECONDARY EDUCATION	2016	2018	N/A	2018	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	TERTIARY EDUCATION	2018	2022	CUM LAUDE	2022	COLLEGE SCHOLAR
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	AUGUST 20, 2023
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[illegible]

## V. WORK EXPERIENCE

[illegible]

SIGNATURE	<i>[Signature]</i>	DATE	AUGUST 20, 2023
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[illegible]

VI. LEARNING AND DEVELOPMENT (L&amp;D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

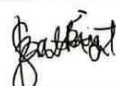

[illegible]

#### VIII. OTHER INFORMATION

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	AUGUST 20, 2023

AUGUST 20, 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 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> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>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> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.												
NAME	ADDRESS	TEL. NO.														
<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>																
<p>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</p> <p>PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: PRC</p> <p>ID/License/Passport No.: 2059956</p> <p>Date/Place of Issuance: June 26, 2023/ Ormoc City</p>	<p style="text-align: center;">         Signature (Sign inside the box)        14 JUN 20, 2023        Date Accomplished     </p>															
<p style="text-align: center;">         Right Thumbmark     </p>																
<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; height: 50px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>																