## **PERSONAL DATA SHEET**

|                               | TO FILLING OUT THE PERSONAL DATA SHE<br>o  ) and use separate sheet if necessary. Indicate |   |   | E PUS FOR                                       | 1. CS ID No.     |  | (Do not fill up.                     | For CSC use only                               |  |
|-------------------------------|--|---|---|---|------------------|--|--------------------------------------|--|--|
| I. PERSONAL INFORMATION       | DN   |   |   |   |                  |  |                                      |  |  |
| 2. SURNAME                    | GODMALING  |   |   |   |                  | 1  |                                      |  |  |
| FIRST NAME                    | DENMARK NAME EXTENSION (JR., SR)   |   |   |   |                  |  |                                      |  |  |
| MIDDLE NAME                   | LLOREN   | OREN N/A                                  |   |   |                  |  |                                      |  |  |
| 3. DATE OF BIRTH (mm/dd/yyyy) | 10/05/1997   | 16. CITIZENSHIP                           | ☑ Filipino □ Dual Citizenship □ by birth □ by naturalizat |   |                  | tion   |                                      |  |  |
| 4. PLACE OF BIRTH             | BRGY. CONALUM, INOPACAN, LEYTE   | If holder of dual citizens                |   |   |                  | country:   |                                      |  |  |
| 5. SEX                        | ✓ Male ☐ Female  | please indicate the det                   | ails.   | Philippines                                     |                  |  |                                      | •  |  |
| 6 CIVIL STATUS                |  |   |   | N/A N/A use/Block/Lot No. N/A bdivision/Village |                  |  | N/A<br>Street<br>CONALUM<br>Barangay |  |  |
| 7. HEIGHT (m)                 | 1.7373   |   | l!  | INOPACAN  City/Municipality                     |                  |  | LEYTE                                |  |  |
| 8. WEIGHT (kg)                | 65   | ZIP CODE                                  | U   | пулиинстранцу                                   |                  | 6522   | Province<br>522                      |  |  |
| 9. BLOOD TYPE                 | N/A  | 18. PERMANENT ADDRESS                     | Univ  | N/A   | _                |  | N/A                                  |  |  |
| 10. GSIS ID NO.               | N/A  |   |   | N/A   |                  |  | Street CONALUM                       |  |  |
| 11. PAG-IBIG ID NO.           | 121238413524   | -   |   | INOPACAN  | 9                |  | Barangay<br>LEYTE                    |  |  |
| 12. PHILHEALTH NO.            | 1325052772009  | ZIP CODE                                  | City/Municipality 6522                                    |   | 6522             | Province   |                                      |  |  |
| 13. SSS NO.                   | 3480960165   | 19. TELEPHONE NO.                         | N/A   |   |                  | N/A  |                                      |  |  |
| 14. TIN NO.                   | 353884938000   | 20. MOBILE NO.                            | 09162914477   |   | 162914477        |  |                                      |  |  |
| 15. AGENCY EMPLOYEE NO.       | N/A  | 21. E-MAIL ADDRESS (if any)               | dengodmaling@gmail.com                                    |   |                  | om   |                                      |  |  |
| II. FAMILY BACKGROUND         |  |   |   |   |                  |  |                                      |  |  |
| 22. SPOUSE'S SURNAME          | N/A  |   | 23. NAME of CHILDREN (Write full name and list all)       |   | d list all)      | II) DATE OF BIRTH (mm/dd/yyyy)                       |                                      |  |  |
| FIRST NAME                    | N/A  | NAME EXTENSION (JR., SR)                  | N/A   |   | N/A              |  | I/A                                  |  |  |
| MIDDLE NAME                   | N/A  | N/A                                       |   |   |                  |  |                                      |  |  |
| OCCUPATION                    | N/A  |   |   |   |                  |  |                                      |  |  |
| EMPLOYER/BUSINESS NAME        | N/A  |   |   |   |                  |  |                                      |  |  |
| BUSINESS ADDRESS              | N/A  |   |   |   |                  |  |                                      |  |  |
| TELEPHONE NO.                 | N/A  |   |   |   |                  |  |                                      |  |  |
| 24. FATHER'S SURNAME          | GODMALING  |   |   |   |                  |  |                                      |  |  |
| FIRST NAME                    | NOEL   | NAME EXTENSION (JR., SR)                  |   |   |                  |  |                                      |  |  |
| MIDDLE NAME                   | OBADO  | N/A                                       |   |   |                  |  |                                      |  |  |
| 25. MOTHER'S MAIDEN NAME      |  |   |   |   |                  |  |                                      |  |  |
| SURNAME                       | LLOREN   |   |   |   |                  |  |                                      |  |  |
| FIRST NAME                    | TERESITA   |   |   |   |                  |  |                                      |  |  |
| MIDDLE NAME                   | PETEROS  |   | (Continue on separate sheet if neces                      |   |                  | ssary)   |                                      |  |  |
| III. EDUCATIONAL BACKG        | ROUND  |   |   |   |                  |  |                                      |  |  |
| 26. LEVEL                     | NAME OF SCHOOL<br>(Write in full)  | BASIC EDUCATION/DEGREE<br>(Write in full) | E/COURSE  | PERIOD OF                                       | ATTENDANCE<br>To | HIGHEST LEVEL/<br>UNITS EARNED<br>(if not graduated) | YEAR<br>GRADUATED                    | SCHOLARSHIP,<br>ACADEMIC<br>HONORS<br>RECEIVED |  |
| ELEMENTARY                    | CONALUM ELEMETARY SCHOOL   | PRIMARY EDUCATION                         |   | 2004  | 2010             | COMPLETED  | 2010                                 | 7th HONOR                                      |  |
| SECONDARY                     | CONALUM NATIONAL HIGHSCHOOL  | SECONDARY EDUCATION                       |   | 2010  | 2014             | COMPLETED  | 2014                                 | 7th HONOR                                      |  |
| VOCATIONAL /<br>TRADE COURSE  | N/A  | N/A                                       |   |   |                  |  |                                      |  |  |
| COLLEGE                       | VISAYAS STATE UNIVERSITY   | BACHELOR OF SCIE                          |   | 2014  | 2018             | COMPLETED  | 2018                                 | N/A  |  |
| GRADUATE STUDIES              | N/A  | N/A                                       |   |   |                  |  |                                      |  |  |
|                               |  | Continue on separate sheet if neces       | ssary)  | I   | 1                | !<br>  | !                                    | ı  |  |
| SIGNATURE                     | whileney   |   |   | DATE  |                  | February 7, 2022                                     |                                      |  |  |

| IV. CIVIL S  | ERVICE ELIG      | GIBILITY                        |                 |                          |                         |                   |  |                     |                  |
|--|------------------|---------------------------------|-----------------|--------------------------|-------------------------|-------------------|--|---------------------|------------------|
| 27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER<br>SPECIAL LAWS/ CES/ CSEE<br>BARANGAY ELIGIBILITY / DRIVER'S LICENSE |                  |                                 | RATING          | DATE OF<br>EXAMINATION / | PLACE OF EXAMINA        | TION / CONFE      | RMENT  | LICENSE (if a       |                  |
|  |                  |                                 | (If Applicable) | CONFERMENT               |                         |                   | NUMBER   | Date of<br>Validity |                  |
| LICENSURE  | EXAMINATIO       | N FOR AGRICULTURIST             | 81.17           | NOVEMBER 9-11,<br>2021   | LINO GONZAGA AVE.,C     | OWNTOWN<br>ITY    | ,TACLOBAN  | 0038087             | 10/05/202        |
|  |                  |                                 |                 |                          |                         |                   |  |                     |                  |
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|  | EXPERIENCE       | :<br>ent. Start from your recen |                 | ntinue on separate sheet |                         | ed Work Fx        | nerience shee                                      | if                  |                  |
| 28. INCLU  | JSIVE DATES      | POSITION T                      |                 |                          | ENCY / OFFICE / COMPANY |                   | SALARY/ JOB/ PAY<br>GRADE (if                      | STATUS OF           | GOV'T            |
| From   | m/dd/yyyy)<br>To | (Write in full/Do not           |                 |                          | II/Do not abbreviate)   | MONTHLY<br>SALARY | applicable)& STEP<br>(Format "00-0")/<br>INCREMENT | APPOINTMENT         | SERVICE<br>(Y/N) |
| 09/16/2019   | 10/31/2020       | CUSTOMER SERVICE R              | EPRESENTATIVE   |                          | LTH TECHNOLOGIES        | 19500.00          | N/A  | PERMANENT           | NO               |
|  |                  | I                               |                 | PHILI                    | PPINES INC.             |                   |  |                     |                  |
|  |                  |                                 |                 |                          |                         |                   |  |                     |                  |
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| SIGNA  | ATURE            | juhnel                          |                 | Copulate Siles           | DATE                    |                   | Februa   | ry 7, 2022          |                  |

| VI. VC | DLUNTARY WORK OR INVOLVEMENT                              | IN CIVIC / NON-GOVERNMENT                                   |                   |                                |                 |   |  |
|--------|---|---|-------------------|--------------------------------|-----------------|---|--|
| 29.    | NAME & ADDRESS OF OI<br>(Write in full)                   |   |                   | /E DATES<br>ld/yyyy)<br>To     | NUMBER OF HOURS |   | POSITION / NATURE OF WORK                  |
| N/A    |   |   | N/A               | N/A                            | N/A             | N/A   |  |
|        |   |   |                   |                                |                 |   |  |
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|        |   |   | tinue on separate |                                | )               |   |  |
| VII. L | EARNING AND DEVELOPMENT (L&D)                             | INTERVENTIONS/TRAINING P                                    | ROGRAMS A         | TTENDED                        | 1               | 1   |  |
| 30.    | TITLE OF LEARNING AND DEVELOPMENT INTE<br>(Write in full) |   | ATTEN             | DATES OF<br>IDANCE<br>Id/yyyy) | NUMBER OF HOURS | Type of LD<br>( Managerial/<br>Supervisory/<br>Technical/etc) | CONDUCTED/ SPONSORED BY<br>(Write in full) |
| 1      | BARANGAY INTEGRATED DEVELOPMEN                            | T PLAN (BIDP) WORKSHOP                                      | 11/26/2018        | 11/29/2018                     | 32 HOURS        |   | INOPACAN MUNICIPAL OFFICE                  |
|        | BARANGAY MANAGEMENT INFO                                  | RMATION SYSTEM  | 11/22/2018        | 11/23/2018                     | 16 HOURS        |   | INOPACAN MUNICIPAL OFFICE                  |
|        |   |   |                   |                                |                 |   |  |
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| VIII ( | OTHER INFORMATION   | (Con  | tinue on separate | sheet if necessary             | <u>)</u>        |   | _  |
| 31.    | SPECIAL SKILLS and HOBBIES                                | 32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) |                   |                                |                 | 33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)    |  |
|        | BASIC COMPUTER SKILLS                                     | N/A   |                   |                                |                 |   | N/A  |
|        | HOSTING SEMINARS  |   |                   |                                |                 |   |  |
|        | WRITING   |   |                   |                                |                 |   |  |
|        |   |   |                   |                                |                 |   |  |
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|        | SIGNATURE   | (Continue on separate sheet if necessary                    |                   |                                |                 | ΔTF   | February 7, 2022                           |

| 34. Are you related by consanguinity or affinity to the appointing  |   |  |  |  |  |
|---|---|--|--|--|--|
| chief of bureau or office or to the person who has immedia<br>Bureau or Department where you will be apppointed,                              | te supervision over you in the Office,                      |  |  |  |  |
| a. within the third degree?   | ☐ YES ☑ NO  | )  |  |  |  |
| b. within the fourth degree (for Local Government Unit - Ca   | ☐ YES ☑ NO  |  |  |  |  |
| 2   | If YES, give details:                                       |  |  |  |  |
|   |   |  | _  |  |  |
| 35. a. Have you ever been found guilty of any administrative o  | ☐ YES ☑ NO  | )  |  |  |  |
|   |   | If YES, give details:                    |  |  |  |
|   |   |  |  |  |  |
| b. Have you been criminally charged before any court?   |   | ☐ YES ☑ NO                               | 0  |  |  |
| , , ,   | If YES, give details:                                       |  |  |  |  |
|   |   | Date Filed:                              |  |  |  |
| - Have you are been consisted of any piece or violation of  | and law days and analysis                                   | Status of Case/s:                        |  |  |  |
| 36. Have you ever been convicted of any crime or violation of<br>by any court or tribunal?  | any law, decree, ordinance or regulation                    | ☐ YES ☑ N                                | NO   |  |  |
|   | If YES, give details:                                       |  |  |  |  |
| 37. Have you ever been separated from the service in any of t   | ho following modes: regignation                             |  |  |  |  |
| retirement, dropped from the rolls, dismissal, termination, e   |   | YES □ NO     If YES, give details:       |  |  |  |
| out (abolition) in the public or private sector?  | ·   |  |  |  |  |
| 38. a. Have you ever been a candidate in a national or local el   | ection held within the last year (except                    | ☐ YES ☑ NO                               |  |  |  |
| Barangay election)?   |   | If YES, give details:                    |  |  |  |
| <ul> <li>b. Have you resigned from the government service during<br/>election to promote/actively campaign for a national or local</li> </ul> |   | YES NO                                   |  |  |  |
| 39. Have you acquired the status of an immigrant or permaner  |   | If YES, give details:                    |  |  |  |
| 39. Have you acquired the status of an infiningrant of permaner   | ☐ YES ☑ NO If YES, give details (country):                  |  |  |  |  |
|   | 11 120, give details (country).                             |  |  |  |  |
| 40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma  | agna 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?  | ☐ YES ☑ NO If YES, please specify:                          |  |  |  |  |
| b. Are you a person with disability?  | Are you a person with disability?                           |  |  |  |  |
|   | If YES, please specify ID No:                               |  |  |  |  |
| c. Are you a solo parent?   |   | ☐ YES ☑ NO If YES, please specify ID No: |  |  |  |
| 44 DEFEDENCE (Decree of soleted by accompanie), as effects to applicate   | at lana into  |  |  |  |  |
| 41. REFERENCES (Person not related by consanguinity or affinity to applica  | 1   | TEL NO                                   |  |  |  |
| NAME  | ADDRESS   | TEL. NO.                                 |  |  |  |
| MIRIAM N. FLORA   | MAYORGA, LEYTE  | 09058348639                              | 125  |  |  |
| ARIES GOMEZ   | METRO MANILA  | 09994648731                              | (4)  |  |  |
| JAMES MARLON MANABAT  | METRO MANILA  | 09178673855                              |  |  |  |
| 42. I declare under oath that I have personally accomplishe   | d this Personal Data Sheet which is a t                     | rue, correct and                         |  |  |  |
| complete statement pursuant to the provisions of perting  |   |  | DEN MARK L. GODMALING  |  |  |
| Philippines. I authorize the agency head/authorized rep<br>I agree that any misrepresentation made in this do                                 |   |  | РНОТО  |  |  |
| administrative/criminal case/s against me.  |   | _  | at the same of the |  |  |
| Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)   |   |  |  |  |  |
| PLEASE INDICATE ID Number and Date of Issuance  | while ne  | 11                                       |  |  |  |
| Government Issued ID: PROFESSIONAL IDENTIFICATION CARD  | / 1   | 11                                       |  |  |  |
| ID/License/Passport No.: 0038087  | /License/Passport No.: 0038087 Signature (Sign inside the b |  |  |  |  |
| Date/Place of Issuance: 02/07/2022/STA. ROSA, LAGUNA  | - '   | Disht Thursday                           |  |  |  |
|   |   | Right Thumbmark                          |  |  |  |
| SUBSCRIBED AND SWORN to before me this  | , affiant exhibi  | ting his/her validly issued gover        | rnment ID as indicated above.  |  |  |
| Г   |   |  |  |  |  |
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