

## 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	BENGALAN		
FIRST NAME	MONNA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ESPINOSA		
3. DATE OF BIRTH (mm/dd/yyyy)	08/29/1994	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, LEYTE	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	House/Block/Lot No. Street Peñalosa Subdivision/Village Barangay Alangalang Leyte City/Municipality Province
7. HEIGHT (m)	1.56 m	ZIP CODE	6517
8. WEIGHT (kg)	95 kg	18. PERMANENT ADDRESS	Zone 4 House/Block/Lot No. Street Patag Subdivision/Village Barangay Baybay Leyte City/Municipality Province
9. BLOOD TYPE	B+	ZIP CODE	6521
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	None
11. PAG-IBIG ID NO.	121147148075	20. MOBILE NO.	0931-0388-610
12. PHILHEALTH NO.	13-250364103-1	21. E-MAIL ADDRESS (if any)	monnabengalan@gmail.com
13. SSS NO.	06-3699475-5		
14. TIN NO.	324-744-688-0000		
15. AGENCY EMPLOYEE NO.	N/A		

## II. FAMILY BACKGROUND

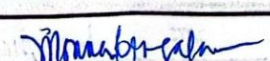
22. SPOUSE'S SURNAME	N/A	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	N/A		
OCCUPATION	N/A		
EMPLOYER/BUSINESS NAME	N/A		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	N/A		
24. FATHER'S SURNAME	BENGALAN		
FIRST NAME	ANTONIO	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	POLIVIT		
25. MOTHER'S MAIDEN NAME			
SURNAME	ESPINOSA		
FIRST NAME	MELCHORA		
MIDDLE NAME	PASOHIL		

(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	PATAG ELEMENTARY SCHOOL	PRIMARY	2000	2007	N/A	2007	Salutatorian
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	SECONDARY	2007	2011	N/A	2011	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN STATISTICS	2011	2015	N/A	2015	Staff Dependent Grant
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF AGRICULTURAL DEVELOPMENT	2019	N/A	9 UNITS	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	March 19, 2024
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[illegible]

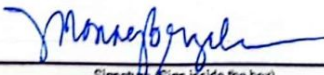
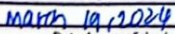
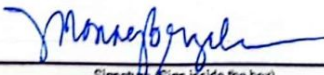
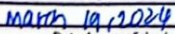
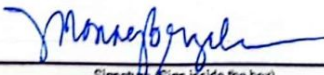
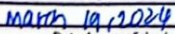
#### V. WORK EXPERIENCE


(Include private employees)

(Continue on separate sheet if necessary)

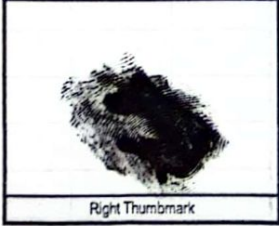
March 14, 2024



<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: Date Filed: _____ 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 checked="" type="checkbox"/> YES      <input type="checkbox"/> NO</p> <p>If YES, give details: Resignation, End of Contract _____</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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>PAULO G. BATIDOR</td> <td>BILWANG, ISABEL, LEYTE</td> <td>09684442159</td> </tr> <tr> <td>MAY ANN E. PALEN</td> <td>VSU, VISCA, BAYBAY CITY, LEYTE</td> <td>09178524436</td> </tr> <tr> <td>VIOLETA R. TIEMPO</td> <td>LILLOAN, SOUTHERN LEYTE</td> <td>09051733081</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	PAULO G. BATIDOR	BILWANG, ISABEL, LEYTE	09684442159	MAY ANN E. PALEN	VSU, VISCA, BAYBAY CITY, LEYTE	09178524436	VIOLETA R. TIEMPO	LILLOAN, SOUTHERN LEYTE	09051733081		
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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 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>UMID</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>CRN-0111-5040954-7</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td></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:	UMID	ID/License/Passport No.:	CRN-0111-5040954-7	Date/Place of Issuance:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center;">             Signature (Sign inside the box)         </td> </tr> <tr> <td colspan="2" style="text-align: center;">             Date Accomplished         </td> </tr> </table>	 Signature (Sign inside the box)		 Date Accomplished	
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<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: 300px; height: 60px; margin: 10px auto; text-align: center; line-height: 60px;">       Person Administering Oath     </div>															



PHOTO



Right Thumbmark