

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	PERANTE		
FIRST NAME	FERDINIL JUDE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ABARSOSA		
3. DATE OF BIRTH (mm/dd/yyyy)	July 02, 1990	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	MANILA	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input 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	AREA I House/Block/Lot No. _____ Street _____ 95 CAIBAAN Subdivision/Village _____ Barangay _____ TACLOBAN CITY LEYTE City/Municipality _____ Province _____ ZIP CODE 6000
7. HEIGHT (m)	1.7	18. PERMANENT ADDRESS	AREA I House/Block/Lot No. _____ Street _____ 95 CAIBAAN Subdivision/Village _____ Barangay _____ TACLOBAN CITY LEYTE City/Municipality _____ Province _____ ZIP CODE 6500
8. WEIGHT (kg)	60	19. TELEPHONE NO.	NONE
9. BLOOD TYPE	O	20. MOBILE NO.	09423390738
10. GSIS ID NO.	NONE	21. E-MAIL ADDRESS (If any)	ferdz.walne.mal@gmail.com
11. PAG-IBIG ID NO.	NONE		
12. PHILHEALTH NO.	NONE		
13. SSS NO.	NONE		
14. TIN NO.	614-397-397-00000		
15. AGENCY EMPLOYEE NO.	NONE		

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)	WILLIAN ERDWAINE B. PERANTE	July 18, 2013
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	PERANTE			
FIRST NAME	FERDINAND	NAME EXTENSION (JR., SR)		
MIDDLE NAME	CESAR			
25. MOTHER'S MAIDEN NAME				
SURNAME	ABARSOSA			
FIRST NAME	WILMA			
MIDDLE NAME	DALDE			

(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	REGIONAL CONTINUING EDUCATION SPED CENTER	PRIMARY EDUCATION	1997	2003	GRADUATE	2003	NONE
SECONDARY	LEYTE NATIONAL HIGH SCHOOL	HIGH SCHOOL	2003	2007	GRADUATE	2007	NONE
VOCATIONAL / TRADE COURSE	TECHNICAL EDUCATION AND SKILLS DEVELOPMENT	COMPUTER HARDWARE SERVICING	2008	2008	GRADUATE	2008	NONE
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN COMPUTER SCIENCE	2016	2022	GRADUATE	2022	NONE

(Continue on separate sheet if necessary)

SIGNATURE		DATE	March 28, 2023
-----------	---	------	----------------

CIVIL SERVICE ELIGIBILITY

CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
				NUMBER	Date of Validity
Certificate of Proficiency in Computer Programming	91.93%	November 10, 2022	DICT, Bohol Office		


(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

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

28.	INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable) & STEP (Format "00-00")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
	From	To						
	11/11/22	1/30/23	Information System Analyst I	Philippine Statistics Authority	P36,141.36	SG12	COSW	N
	10/1/22	11/10/22	Registration Kit Operator	Philippine Statistics Authority	P18,720	SG7	COSW	N

(Continue on separate sheet if necessary)

SIGNATURE		DATE	March 28, 2023
------------------	---	-------------	----------------

ADDITIONAL WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION-S

NAME & ADDRESS OF ORGANIZATION
(Write in full)

INCLUSIVE DATES
(mm/dd/yyyy)

NUMBER OF HOURS

POSITION / NATURE OF WORK

NONE

(Continue on separate sheet if necessary)

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

Start from the most recent L&D training program and include only the relevant L&D training taken for the last five (5) years for Division Chief/Executive Management positions

30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	DATA PRIVACY, SECURITY, AND FRAUD AWARENESS TRAINING	12/05/2022	12/05/2022	8	TECHNICAL	PHILIPPINE STATISTICS AUTHORITY, CEBU CITY
	ANTI-VIOLENCE AGAINST WOMEN AND THEIR CHILDREN ACT OF 2004	11/28/2022	11/28/2022	8	PERSONAL DEVELOPMENT	PHILIPPINE STATISTICS AUTHORITY, CEBU CITY
	PROCEDURES IN THE ISSUANCE OF PRINTABLE EHPILDS	10/01/2022	10/2/2022	16	TECHNICAL	PHILIPPINE STATISTICS AUTHORITY, CEBU CITY
	IT PROFESSION: A DIGITAL SOLUTION TO THE NEW NORMAL GLOBAL OPERATIONS	05/19/2021	05/19/2021	4	TECHNICAL	PHILIPPINE SOCIETY OF I.T EDUCATORS

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION


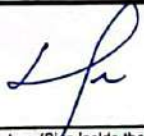
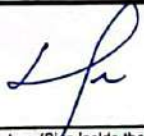
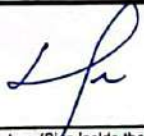
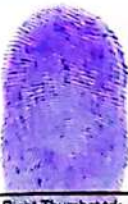
31.	SPECIAL SKILLS AND HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Programming		N/A		N/A
	Data Encoding				

(Continue on separate sheet if necessary)

SIGNATURE

DATE

March 28, 2023

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, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ Date Filed: _____ Status of Case/s: _____												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
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?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? 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?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
39. Have you acquired the status of an immigrant or permanent resident of another country?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details (country): _____												
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: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)														
<table border="1"><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>MAGDALENE UNA JAN</td><td>VSU, BAYBAY CITY</td><td>9171541530</td></tr><tr><td>NEEL ALBERT BRISO</td><td>PSA, CEBU CITY</td><td>9265712008</td></tr><tr><td>LUDOVICO B. CUSTODIO JR.</td><td>PSA, CEBU CITY</td><td>09070369139</td></tr></tbody></table>			NAME	ADDRESS	TEL. NO.	MAGDALENE UNA JAN	VSU, BAYBAY CITY	9171541530	NEEL ALBERT BRISO	PSA, CEBU CITY	9265712008	LUDOVICO B. CUSTODIO JR.	PSA, CEBU CITY	09070369139
NAME	ADDRESS	TEL. NO.												
MAGDALENE UNA JAN	VSU, BAYBAY CITY	9171541530												
NEEL ALBERT BRISO	PSA, CEBU CITY	9265712008												
LUDOVICO B. CUSTODIO JR.	PSA, CEBU CITY	09070369139												
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.		 PHOTO												
<table border="1"><tr><td>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID: BIR</td></tr><tr><td>ID/License/Passport No.: 614-397-397-00000</td></tr><tr><td>Date/Place of Issuance: SEP 12 2022 ORMOC CITY</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: BIR	ID/License/Passport No.: 614-397-397-00000	Date/Place of Issuance: SEP 12 2022 ORMOC CITY	<table border="1"><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>28 MARCH 2023</td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	28 MARCH 2023	Date Accomplished				
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance														
Government Issued ID: BIR														
ID/License/Passport No.: 614-397-397-00000														
Date/Place of Issuance: SEP 12 2022 ORMOC CITY														
														
Signature (Sign inside the box)														
28 MARCH 2023														
Date Accomplished														
<table border="1"><tr><td>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID: BIR</td></tr><tr><td>ID/License/Passport No.: 614-397-397-00000</td></tr><tr><td>Date/Place of Issuance: SEP 12 2022 ORMOC CITY</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: BIR	ID/License/Passport No.: 614-397-397-00000	Date/Place of Issuance: SEP 12 2022 ORMOC CITY	 Right Thumbmark								
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance														
Government Issued ID: BIR														
ID/License/Passport No.: 614-397-397-00000														
Date/Place of Issuance: SEP 12 2022 ORMOC CITY														
SUBSCRIBED AND SWORN to before me this <u>28 MARCH 2023</u> , affiant exhibiting his/her validly issued government ID as indicated above.														
<table border="1"><tr><td>DOC. NO. <u>189</u> PAGE NO. <u>1</u> BOOK NO. <u>1</u> SERIES OF <u>100</u></td><td>ATTY. DECYROSE P. PAPA Public Attorney II (Pursuant to RA 8406) Person Administering Oath</td></tr></table>			DOC. NO. <u>189</u> PAGE NO. <u>1</u> BOOK NO. <u>1</u> SERIES OF <u>100</u>	ATTY. DECYROSE P. PAPA Public Attorney II (Pursuant to RA 8406) Person Administering Oath										
DOC. NO. <u>189</u> PAGE NO. <u>1</u> BOOK NO. <u>1</u> SERIES OF <u>100</u>	ATTY. DECYROSE P. PAPA Public Attorney II (Pursuant to RA 8406) Person Administering Oath													