

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. F

I. PERSONAL INFORMATION

2. SURNAME	GONZALES		
FIRST NAME	GENOVIVA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	BAEL		
3. DATE OF BIRTH (mm/dd/yyyy)	17/11/1998	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	GUIUAN EASTERN SAMAR	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 GUADALUPE Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	150	ZIP CODE	6521
8. WEIGHT (kg)	39.4	18. PERMANENT ADDRESS	BLK. 4, LOT.15 VISAYAS DRIVE House/Block/Lot No. Street KASSEL CITY ABUCAY Subdivision/Village Barangay TACLOBAN LEYTE City/Municipality Province
9. BLOOD TYPE	O	ZIP CODE	6500
10. GSIS ID NO.		19. TELEPHONE NO.	
11. PAG-IBIG ID NO.		20. MOBILE NO.	09312171253
12. PHILHEALTH NO.	13-202462777-6	21. E-MAIL ADDRESS (if any)	genovia.gonzales@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	GONZALES			
FIRST NAME	CESARIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	MONTALBAN			
25. MOTHER'S MAIDEN NAME	CADILLO			
SURNAME	GONZALES			
FIRST NAME	OTELIA			
MIDDLE NAME	BAEL		(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
			From	To		
ELEMENTARY	BRGY. LUPOK GUIUAN EASTERN SAMAR	N/A				2011
SECONDARY	ST. MARY'S ACADEMY OF GUIUAN	N/A				2016
VOCATIONAL / TRADE COURSE	N/A	N/A				

COLLEGE	LEYTE NORMAL UNIVERSITY	BACHELOR OF SECONDARY EDUCATION				2019
GRADUATE STUDIES						
(Continue on separate sheet if necessary)						
SIGNATURE		DATE		CS FORM 212 (Revised 2017),		

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For CSC use only)

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FH (mm/dd/yyyy)

SCHOLARSHIP/
ACADEMIC
HONORS
RECEIVED

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IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(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.

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE		CS FORM 212 (Revised 2017), Page 2 of 4
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

[illegible]

(Continue on separate sheet if necessary)

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	COMPUTER SKILLS		N/A		INTERACT SOCIETY
	PEOPLE SKILLS				
	EMPATHY				
	ARRANGING THINGS IN ORDER				

TAKING INITIATIVE		
(Continue on separate sheet if necessary)		
SIGNATURE		DATE
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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, 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 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: _____ <div style="text-align: right;">Date Filed: _____ Status of Case/s: _____</div>	
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)		
NAME	ADDRESS	TEL. NO.
RYAN G. DESTURA	TACLOBAN CITY	ryandestura@gmail.co
NINO VAL PACAOL	TACLOBAN CITY	09662982595
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.		



Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i>	
Government Issued ID:	1820046
ID/License/Passport No.:	1820046
Date/Place of Issuance:	12/23/2019

Signature (Sign inside the box)
Date Accomplished

SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID

Person Administering Oath

[illegible]

Right Thumbmark

as indicated above.