

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	MATA		
FIRST NAME	CHRISTINE JOY	NAME EXTENSION (JR., SR)	
MIDDLE NAME	REYES		
3. DATE OF BIRTH (mm/dd/yyyy)	DECEMBER 10, 1994	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.	<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	LIGAO CITY, ALBAY		
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6 CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS ZIP CODE	ZONE 1 House/Block/Lot No. Street CONCEPCION GRANDE Subdivision/Village Barangay NAGA CITY CAMARINES SUR City/Municipality Province 4400
7. HEIGHT (m)	1.65m		
8. WEIGHT (kg)	77 kg		
9. BLOOD TYPE	B+		
10. GSIS ID NO.			
11. PAG-IBIG ID NO.	121241104761	18. PERMANENT ADDRESS ZIP CODE	PUROK 2 House/Block/Lot No. Street CATMON Subdivision/Village Barangay ORMOC CITY LEYTE City/Municipality Province 6541
12. PHILHEALTH NO.	102027065705		
13. SSS NO.	0514899493		
14. TIN NO.	354246884	19. TELEPHONE NO.	
15. AGENCY EMPLOYEE NO.		20. MOBILE NO.	09672478936
		21. E-MAIL ADDRESS (if any)	tinrabereyes@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	MATA		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	FRANCIS AMMON	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	MARQUEZ			
OCCUPATION	NONE			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	REYES			
FIRST NAME	JOSE	NAME EXTENSION (JR., SR)		
MIDDLE NAME	BLACER			
25. MOTHER'S MAIDEN NAME				
SURNAME	RABE			
FIRST NAME	MARISSA			
MIDDLE NAME	RODRIGUEZ		(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	CARARAYAN-NAGA ELEM SCHOOL LIGAO WEST CENTRAL ELEM SCHOOL (B)	ELEMENTARY	2001 2004	2004 2007		2007	WITH HONORS
SECONDARY	LIGAO NATIONAL HIGH SCHOOL	HIGH SCHOOL	2007	2011		2011	
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A		N/A	
COLLEGE	BICOL UNIVERSITY - MAIM CAMPUS	BACHELOR OF SCIENCE IN CHEMISTRY	2011	2016		2016	
GRADUATE STUDIES	N/A	N/A	N/A	N/A		N/A	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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[illegible]

(Continue on separate sheet if necessary)

(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	
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	THE CHURCH OF JESUS CHRIST OF LATTER DAY SAINTS - INSULAR VILLAGE 1, LANANG DAVAO CITY, PHILIPPINES	MAY 2017	NOV 2018	6564	FULL-TIME MISSIONARY

(Continue on separate sheet if necessary)

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

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			
	INTEGRATED PEST MANAGEMENT	MAR 17, 2021	MAR 17, 2021	3 HRS	SUPERVISOR	PEPSI-COLA PRODUCTS PHILIPPINES INC - HO
	BASIC TRAINING ON LABORATORY INSTRUMENT AND TECHNIQUES	FEB 16, 2021	FEB 17, 2021	8 HRS	TECHNICAL	PEPSI-COLA PRODUCTS PHILIPPINES INC - INTEGRATED CHEMIST OF THE PHILIPPINES
	SOAP MAKING AND FORMULATION: CHEMIST WAY	DEC 4, 2020	DEC 4, 2020	5 HRS	TECHNICAL	INTEGRATED CHEMIST OF THE PHILIPPINES
	HAZARD ANALYSIS CRITICAL CONTROL POINT (HACCP)	NOV 4, 2020	NOV 6, 2020	27 HRS	SUPERVISOR	PEPSI-COLA PRODUCTS PHILIPPINES INC/SOCIETE GENERALE DE SURVEILLANCE (SGS)
	FOOD SAFETY TRAINING ON HAZARD CONTROL PLAN	OCT 22, 2020	OCT 23, 2020	18 HRS	SUPERVISOR	PEPSI-COLA PRODUCTS PHILIPPINES INC/SOCIETE GENERALE DE SURVEILLANCE (SGS)
	MANUFACTURING-CARBONATED AND COLD-FILL (MCC) TRAINING	JULY 6, 2020	JULY 9, 2020	36 HRS	SUPERVISOR	PEPSICO INTERNATIONAL
	PREPARATION OF A CHEMICAL LABORATORY SAFETY MANUAL: A CATO REQUIREMENT	MAR 9, 2021	MAR 20, 2021	14 HRS	TECHNICAL	NTEGRATED CHEMIST OF THE PHILIPPINES
	ICP CHEM WEEK 2021: BASIC TRAINING ON LABORATORY INSTRUMENTS AND TECHNIQUES	MAY 19, 2021	MAY 20, 2021	12 HRS	TECHNICAL	NTEGRATED CHEMIST OF THE PHILIPPINES
	35TH CHEMISTRY WEEK	SEP 20, 2021	SEP 24, 2021	45 HRS	TECHNICAL	NTEGRATED CHEMIST OF THE PHILIPPINES
	AIB - FS/SELF INSPECTION	OCT 7, 2021	OCT 7, 2021	10 HRS	TECHNICAL	NTEGRATED CHEMIST OF THE PHILIPPINES

(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)
	PLAYING PIANO		VOLUNTEER WORK AS FULL-TIME MISSIONARY		INTEGRATED CHEMIST OF THE PHILIPPINES
	READING BOOKS		SEMINARY GRADUATE (CHURCH PROGRAM)		
			INSTITUTE GRADUATE (CHURCH PROGRAM)		

(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)?

☐ YES☒ NO

☐ YES☒ NO

If YES, give details:

35. a. Have you ever been found guilty of any administrative offense?

☐ YES☒ NO

If YES, give details:

b. Have you been criminally charged before any court?

☐ YES☒ 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?

☐ YES☒ 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?

☐ YES☒ 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)?

☐ YES☒ NO

If YES, give details: _____

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?

☐ YES☒ NO

If YES, give details: _____

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES☒ 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?

☐ YES☒ NO

If YES, please specify: _____

b. Are you a person with disability?

☐ YES☒ NO

If YES, please specify ID No: _____

c. Are you a solo parent?


☐ YES☒ NO

If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
JOSETTE P. BISENIO	NAGA CITY, CAMARINES SUR	9054292553
EMMANUEL S. MANAOG	NAGA CITY, CAMARINES SUR	9175057626
GRACE L. AYTONA, RCh	DARAGA ALBAY	9273043789

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

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: PRC

ID/License/Passport No.: 0013075

Date/Place of Issuance: 05/17/2019 / LEGAZPI CITY

Signature (Sign inside the box)

Date Accomplished

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

Person Administering Oath

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