C	F	rm	No.	21
Re	vist	d 21	017	

PERSONAL DATA SHEET

wint legibly. Tick appropriate boxes	TO FILLING OUT THE PERSONAL DATA SI				1. CS ID No		(Do not fill up. i	For CSC use on	
PERSONAL INFORMATIO							3		
2 SURNAME	DIASANTA	naksaa			und.	NAME EXTENSION LIR	era wa	1	
FIRST NAME	ISAIAH					NAME EXTENSION DA	L SPO NIA		
MIDDLE NAME	MACASA								
3 DATE OF BIRTH (mm/dd/yyyy)	08/17/2001	16. CITIZENSHIP		☑ Filipino ☐ Dual Citizenship ☐ by naturalization				tion	
4. PLACE OF BIRTH	TACLOBAN CITY	Il holder of dual citizen	NAME OF TAXABLE PARTY.			Pls. indicate country:			
5. SEX	☑ Male ☐ Female	please indicate the det	lals.	Mar	1	The sales of			
6 CML STATUS	☐ Single ☐ Married ☐ Separated ☐ Other/s:	17, RESIDENTIAL ADDRESS	BLOCK 20 LOT 31 PHASE 3 House/Block/Lof No. VNG Subdivision Subdivision//Bage		GEMINI Street 109-A Berangay LEYTE Province				
7. HEIGHT (m)	1.65		TACLOBAN CITY						
8. WEIGHT (kg)	60	ZIP CODE	30	City/Municipality 6500					
9. BLOOD TYPE	0	18. PERMANENT ADDRESS	Mant aver	WA			ACACIA		
10. GSIS ID NO.	N/A	A STATE OF THE STA	Hous	N/A).		Street Poblecion 07		
			Subdivision/Village Lawaan			Barangay Eastern Samar			
11. PAG-IBIG ID NO.	121356041917	/_//		yrikkunicipality		AND THE PARTY	Province		
12. PHILHEALTH NO.	13-025654836-5	ZIP CODE	100		6813				
13. 555 NO.	06-5023437-8	19. TELEPHONE NO.	and Districts			NA STATE OF THE ST			
14 TIN NO.	671-499-476	20. MOBILE NO.	0			9692309898			
15. AGENCY EMPLOYEE NO.	NA	21. E-MAIL ADDRESS (if any)	<u>Idiasanta</u>		214@gmail.com				
II. FAMILY BACKGROUND		A DEVELOPMENT	diam'r.		SIS/IS		- 24	S. A. S.	
22. SPOUSE'S SURNAME	N/A	NAME EXTENSION (JR., SR)	23. NAME of CHIL	erosacies disclaration di	Design March	list all)	DATE OF BIRT	agetonia-contact	
FIRST NAME	N/A	Person (actor)		N/A			N/A		
MIDDLE NAME	N/A								
OCCUPATION	N/A		av d						
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A	- Indiana file from the second							
TELEPHONE NO.	N/A			-			-		
24. FATHER'S SURNAME	DIASANTA	NAME EXTENSION (JR., SR) IVA		+	-	-			
FIRST NAME	MELECIO						de receipe		
MIDDLE NAME	INCISO				-		-		
25. MOTHER'S MAIDEN NAME	Name and Address of the Owner, where the Party of the Owner, where the Party of the Owner, where the Owner, which is the O								
Carrie and a									
SURNAME	MACASA		Turk.						
FIRST NAME	EVANGELIN		LUE						
FIRST NAME MIDDLE NAME	EVANGELIN FABILLAR			(Cc	ontinue on se	perate sheet If noces	sary)		
FIRST NAME	EVANGELIN FABILLAR		E/COURSE	PERIOD OF	ATTENDANCE	parate sheet if neces HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHI ACADENIC HONORS RECEIVED	
FIRST NAME MIDDLE NAME III. EDUCATIONAL BACKO 26. LEVEL	FABILLAR FROUND NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)		PERIOD OF	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (If not graduated)	YEAR GRADUATED	ACADENIC HONORS RECEIVED	
FIRST NAME MIDDLE NAME III. EDUCATIONAL BACKO 26. LEVEL ELEMENTARY	FABILLAR FROUND NAME OF SCHOOL (Write in full) LAWAAN CENTRAL ELEMENTARY SCHOOL	BASIC EDUCATION/DEGRE		PERIOD OF	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED	YEAR	ACADEMIC HONORS	
FIRST NAME MIDDLE NAME III. EDUCATIONAL BACKO 26. LEVEL	EVANGELIN FABILLAR GROUND NAME OF SCHOOL (Write in full) LAWAAN CENTRAL ELEMENTARY SCHOOL DIVINCE CHILD ACADEMY	BASIC EDUCATION/DEGRE (Write in full) PRIMARY EDUCATE HIGH SCHOOL	ON	PERIOD OF / From 10/06/2008 10/06/2014	To 10/04/2014	HIGHEST LEVEL UNITS EARNED (If not graduated) GRADUATED GRADUATED	YEAR GRADUATED 2014 2018	ACADENIC HONORS RECEIVED N/A	
FIRST NAME MIDDLE NAME III. EDUCATIONAL BACKO 26. LEVEL ELEMENTARY SECONDARY VOCATIONAL / TRADE COURSE	EVANGELIN FABILLAR SROUND NAME OF SCHOOL (Write in full) LAWAAN CENTRAL ELEMENTARY SCHOOL DIVINCE CHILD ACADEMY N/A	BASIC EDUCATION/DEGRE (Write in full) PRIMARY EDUCATE HIGH SCHOOL N/A	ON.	PERIOD OF / From 10/06/2008 10/06/2014 N/A	To 10/04/2014 18/05/2018	HIGHEST LEVELY UNITS EARNED (If not graduated) GRADUATED GRADUATED	YEAR GRADUATED 2014 2018 N/A	ACADENIC HONORS RECEIVED N/A N/A	
FIRST NAME MIDDLE NAME III. EDUCATIONAL BACKO 26. LEVEL ELEMENTARY SECONDARY VOCATIONAL /	EVANGELIN FABILLAR GROUND NAME OF SCHOOL (Write in full) LAWAAN CENTRAL ELEMENTARY SCHOOL DIVINCE CHILD ACADEMY	BASIC EDUCATION/DEGRE (Write in full) PRIMARY EDUCATE HIGH SCHOOL N/A	ON.	PERIOD OF / From 10/06/2008 10/06/2014	To 10/04/2014	HIGHEST LEVELY UNITS EARNED (If not graduated) GRADUATED GRADUATED	YEAR GRADUATED 2014 2018	ACADENIC HONORS RECEIVED N/A	

CARE	ER SERVICE/ RA 1090	(BOARD/RAR) LINDED	San San and Control	DATE OF			200	LICENSE (If a	policable
		RATING (If Applicable)	EXAMINATION / CONFERMENT	TION / CONFE	RMENT	NUMBER	Date		
			Andrew Control of the	LEYTE NATIONAL HIG	NATIONAL HIGHSCHOOL, ATHELETIC			Validi	
		87.9	11/08/2024	ROAD, TAC	NA	N/A			
	Name of				No. 1 over 5				
	EXPERIENCE vate employment.	Start from your recen	\$ 100 m	ntinue on separate shee	tif necessary). be indicated in the attach	ed Work Ex	perlence sheet		
INCL (n	USIVE DATES nm/dd/yyyy)	POSITION TI (Write in full/Do not a		DEPARTMENT / AG (Write in fu	SENCY / OFFICE / COMPANY IVDo not abbreviate)	MONTHLY SALARY	SALARY/ JOBY PAY GRADE (# application) & STEP (Formal 100-01/y INCREMENT	STATUS OF APPOINTMENT	GOVT SERVIC (Y/ N)
/A	NA	N/A			N/A	N/A	N/A	N/A	N/A
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1. VOLUNTARY WORK OR INVOLVEMEN	I IN CIVIC I NON-GOVERNMENT		STATE AND DESCRIPTION OF THE PERSON NAMED IN	ORGANIZATI	JN/S	
29. NAME & ADDRESS OF (Write in 6				POSITION/NATURE OF WORK		
/A	0.7 5.3	N/A	N/A	N/A	N/A	
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II. LEARNING AND DEVELOPMENT (L&L			ATTENDED			Mar. 300 2
Commission of the Commission o	Section Control of the Control of th		VE DATES OF	PART I	Type of LD	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONSTRAINING PROGRAMS (Write in Jul)		ATTENDANCE (mm/dd/yyyy)		NAMES OF HOUSE	(Unregeral/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)
		From	To	C-Dille	Technical/elic)	
Driving Financial Planning and Analys		10/08/2025	10/08/2025	1.0	Technical	Institute of Management Accountants
Business Continuity Management In Operational Resi	lience	29/09/2025	29/09/2025	1.0	Technical	National Institute of Accounting Technicians
Maximizing Efficiency and Compliance: The Future Philippines	ure of Accounting Outsourcing in the	29/07/2025	29/07/2025	1.0	Technical	National Institute of Accounting Technicians
Designing Applied Research in Accounting: Com	pany Case Studies and Elite Interviews	16/11/2024	16/11/2024	2.0	Technical	Philippine Institute of Certified Public Accountants
Internship/On-The-Jo	b Training	22/01/2024	02/04/2024	400.0	Technical	Ormoc City Fire Station
Certified Accounting Technician Level 2 Exam F	Passer (Registered Cost Accountant)	06/05/2023	06/05/2023	3.0	Technical	National Institute of Accounting Technicians
Certified Accounting Technician Level 1 Exa		05/11/2022	05/11/2022	3.0	Technical	National Institute of Accounting Technicians
Cervines Accounting Fechnician Level F CA	in Passer (Cerunica Doonneeper)	V-91 112022	UST HEUEZ	3.0	- Common	national institute of Accounting Features
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AII. OTHER INFORMATION				1 - 1 - 1 - 1	o Penny	
31. SPECIAL SKLLS and HOBBIES	32. NON-		TINCTIONS / REC	OGNITION		33. MENBERSHIP IN ASSOCIATION CRGANIZATION (With in full)
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THE PERSON NAMED IN COLUMN TWO			e sheel if necess	ary)	ALCOHOL:	Transfer of the second
SIGNATURE	1 Con	1		The same of	ATE	Oct. 15,2025

Are you related by consanguinity or affinity to the appointing or recommending authority, or chief of bureau or office or to the person who has immediate supervision over you in the O Bureau or Department where you will be appointed,	
a. within the third degree?	☐ YES ☑ NO
b. within the fourth degree (for Local Government Unit - Career Employees)?	☐ YES ☑ NO
	If YES, give details:
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:
Have you ever been convicted of any crime or violation of any law, decree, ordinance or re	gulation YES NO
by any court or tribunal?	If YES, give details:
University of the second from the second is the fall of the fall of the second is the second in the second is the second in the	
 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 	1 1110
out (abolition) in the public or private sector?	
a. Have you ever been a candidate in a national or local election held within the last year (or Barangay election)?	
	If YES, give details:
b. Have you resigned from the government service during the three (3)-month period befor election to promote/actively campaign for a national or local candidate?	e the last YES PNO If YES, give details:
Have you acquired the status of an immigrant or permanent resident of another country?	
	If YES, give details (country):
Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons	(PA
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following its	V-5-0
Are you a member of any indigenous group?	☐ YES ☑ NO
	If YES, please specify:
Are you a person with disability?	☐ YES ☑ NO If YES, please specify ID No:
Are you a solo parent?	YES NO
	If YES, please specify ID No:
REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)	是
NAME ADDRESS	TEL. NO.
	9.5
	(to)
I declare under oath that I have personally accomplished this Personal Data Sheet w	nich is a true, correct and
complete statement pursuant to the provisions of pertinent laws, rules and regulation	ns of the Republic of the
Philippines. I authorize the agency head/authorized representative to verify/validate the lagree that any misrepresentation made in this document and its attachments	e contents stated herein. shall cause the filing of ISBIQH A. DIA SANTA
administrative/criminal case/s against me.	Sidili Cause vie linig u
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SUBSCRIBED AND SWORN to before me this OCT 1 5 2025 .a	fiant exhibiting his/her validly issued government ID as indicated above.
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