

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	UY-OCO		
FIRST NAME	SOPHIA		NAME EXTENSION (JR., SR)
MIDDLE NAME	YMAS		
3. DATE OF BIRTH (mm/dd/yyyy)	09/06/2002	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	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:		
7. HEIGHT (m)	1.55	17. RESIDENTIAL ADDRESS	BLOCK 2 SAINT PAUL ROAD
8. WEIGHT (kg)	60		House/Block/Lot No. Street
9. BLOOD TYPE	B		PRIME CITY MAKAIT SAN ANTONIO
10. GSIS ID NO.	N/A		Subdivision/Village Barangay
11. PAG-IBIG ID NO.	121340429052		MAKATI CITY NCR
12. PHILHEALTH NO.	132029711120	ZIP CODE	City/Municipality Province
13. SSS NO.	0647567391	18. PERMANENT ADDRESS	N/A ZONE 6
14. TIN NO.	652177356	ZIP CODE	House/Block/Lot No. Street
15. AGENCY EMPLOYEE NO.	N/A		SITIO TABOK CULASIAN
			Subdivision/Village Barangay
			CAPOOCAN LEYTE
			City/Municipality Province
		19. TELEPHONE NO.	N/A
		20. MOBILE NO.	09464583650
		21. E-MAIL ADDRESS (if any)	ymassophia@gmail.com

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	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	UY-OCO			
FIRST NAME	RAFAEL	NAME EXTENSION (JR., SR)		
MIDDLE NAME	PILANDE			
25. MOTHER'S MAIDEN NAME				
SURNAME	YMAS			
FIRST NAME	ETHEL			
MIDDLE NAME	MEDALLA		(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	CULASIAN CAPOOCAN LEYTE	PRIMARY EDUCATION	10/06/2008	31/03/2014	N/A	2014	VALEDICTORIAN
SECONDARY	PALOMPON INSTITUTE OF TECHNOLOGY	SCIENCE TECHNOLOGY ENGINEERING AND MATHEMATICS	13/08/2018	08/03/2020	N/A	2020	WITH HONORS
VOCATIONAL / TRADE COURSE	Technical Education and Skills Development Authority	ANIMAL PRODUCTION- SWINE NCII	08/07/2023	10/08/2023	N/A	2023	OUTSTANDING TRAINEE
COLLEGE	PALOMPON INSTITUTE OF TECHNOLOGY	BACHELOR OF SCIENCE IN HOSPITALITY MANAGEMENT	13/08/2020	24/03/2024	N/A	2024	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/16/2025
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IV. CIVIL SERVICE ELIGIBILITY								
27.	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	
	N/A		N/A	N/A	N/A	N/A	N/A	
(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 "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
	From	To						
	27/11/2024	Present	Customer Service Representative	Foundever Sykes Inc.	17, 000	N/A	Probationary	N/A
	07/06/2024	20/11/2024	Food and Beverage Service	Queens at Bollywoods	16, 500	N/A	Probationary	N/A
	11/06/2023	24/02/2023	Sales and Reservations	Cebu Whitesands Resorts and Spa	N/A	N/A	Internship	N/A
(Continue on separate sheet if necessary)								
SIGNATURE				DATE		16/01/2025		

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

[illegible]

(Continue on separate sheet if necessary)

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

[illegible]





(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	16/01/2025
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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)?	<div style="display: flex; justify-content: space-between;"><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div style="display: flex; justify-content: space-between;"><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>													
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<div style="display: flex; justify-content: space-between;"><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>													
	<div style="display: flex; justify-content: space-between;"><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: 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?	<div style="display: flex; justify-content: space-between;"><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>													
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?	<div style="display: flex; justify-content: space-between;"><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details: _____ Resignation</div>													
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?	<div style="display: flex; justify-content: space-between;"><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>													
	<div style="display: flex; justify-content: space-between;"><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>													
39. Have you acquired the status of an immigrant or permanent resident of another country?	<div style="display: flex; justify-content: space-between;"><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>													
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?	<div style="display: flex; justify-content: space-between;"><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div>													
	<div style="display: flex; justify-content: space-between;"><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>													
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	<div style="display: flex; justify-content: space-between;"><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>													
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)														
<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>Analiza Mabini</td><td>Palompon, Leyte</td><td>9365585285</td></tr><tr><td>Rafael Pulido</td><td>Makati City</td><td>9176290583</td></tr><tr><td>Aironn Quevada</td><td>Makati City</td><td>9175110215</td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	Analiza Mabini	Palompon, Leyte	9365585285	Rafael Pulido	Makati City	9176290583	Aironn Quevada	Makati City	9175110215	
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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.														
<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.) <i>PLEASE INDICATE ID Number and Date of Issuance</i></td></tr><tr><td>Government Issued ID:</td><td>N/A</td></tr><tr><td>ID/License/Passport No.:</td><td>PO856777C</td></tr><tr><td>Date/Place of Issuance:</td><td>N/A</td></tr></table>	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:	N/A	ID/License/Passport No.:	PO856777C	Date/Place of Issuance:	N/A	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="height: 80px; text-align: center; vertical-align: middle;"></td></tr><tr><td style="text-align: center;">Signature (Sign inside the box)</td></tr><tr><td style="text-align: center;">16/01/2025</td></tr><tr><td style="text-align: center;">Date Accomplished</td></tr></table>		Signature (Sign inside the box)	16/01/2025	Date Accomplished	<div style="text-align: center;"> <div style="border: 1px solid black; height: 100px; width: 100%; margin-top: 10px;"></div><div style="text-align: center; font-size: small;">Right Thumbmark</div></div>
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Date Accomplished														
<div style="text-align: center;">SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</div> <div style="text-align: center; margin-top: 20px;"><div style="border: 1px solid black; width: 300px; height: 60px; margin: 0 auto;"></div><div style="border: 1px solid black; width: 300px; height: 20px; margin: 0 auto; text-align: center;">Person Administering Oath</div></div>														