

# 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.

CS ID No. (Do not fill up. For CSC use only)

2. SURNAME	ESTREMOS		
FIRST NAME	IMEE ROSE		NAME EXTENSION (JR., SR.)
MIDDLE NAME	BANDALAN		
3. DATE OF BIRTH (mm/dd/yyyy)	02/14/1984	16. CITIZENSHIP	<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	BAYBAY CITY, 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:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province ZIP CODE 6521
7. HEIGHT (m)	1.5 M	18. PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province ZIP CODE 6251
8. WEIGHT (kg)	58 KG	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	AB+	20. MOBILE NO.	09064181889
10. GSIS ID NO.	N/A	21. E-MAIL ADDRESS (if any)	imee_214@yahoo.com
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	13050065586		
13. SSS NO.	0626401148		
14. TIN NO.	306-062-619		
15. AGENCY EMPLOYEE NO.	N/A		

## 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	VIM HESSE E. SANTOS	11/21/2016
MIDDLE NAME	N/A		
OCCUPATION	N/A		
EMPLOYER/BUSINESS NAME	N/A		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	N/A		
24. FATHER'S SURNAME	ESTREMOS		
FIRST NAME	FIDEL	NAME EXTENSION (JR., SR.)	
MIDDLE NAME	BARING		
25. MOTHER'S MAIDEN NAME			
SURNAME	ESTREMOS		
FIRST NAME	CECILIA		
MIDDLE NAME	BANDALAN		

(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	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPCION	PRIMARY EDUCATION	3/6/1996	03/20/1997	GRADUATED	1997	N/A
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	HIGH SCHOOL	5/6/1997	03/20/2001	GRADUATED	2001	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRICULTURE	5/6/2001	5/4/2005	GRADUATED	2005	N/A
GRADUATE STUDIES	SAINT MICHAEL COLLEGE OF HINDANG, LEYTE, INC.	DIPLOMA IN PROFESSIONAL EDUCATION	5/6/2017	03/18/2018	COMPLETED	2018	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	4/1/2022
-----------	--	------	----------













34. Are you related by consanguinity or affinity to the appointing or recommending official, 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, ☐ YES ☒ NO  
a. within the third degree? ☐ YES ☒ NO  
b. within the fourth degree (for Local Government Unit - Career Employees)? ☐ 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 based out (abolition) in the public or private sector? ☒ YES ☐ NO  
If YES, give details: **END OF TERM**

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: ☒ YES ☐ NO  
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: \_\_\_\_\_ 533  
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
JULIETA T. DENDEN	BAYBAY CITY, LEYTE	9952766566
MONINA V. ARRADAZA	BAYBAY CITY, LEYTE	9317200142
ANALUZ CALGAS	BONTOC, SOUTHERN LEYTE	9157510120

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.)  
PLEASE INDICATE ID Number and Date of Issuance

Government issued ID: PHILHEALTH ID  
ID/License/Passport No.: 130500655586  
Date/Place of Issuance: BAYBAY CITY, LEYTE

Signature (Sign inside the box)  
Date Accomplished: 4/1/2022

Right Thumbmark

IMEE ROSE B. ESTREMAS  
PHOTO

SUBSCRIBED AND SWORN to before me this **01 APR 2022**, affiant exhibiting his/her validly issued government ID as indicated above.

JOC. NO. 390  
PAGE NO. 28  
BOOK NO. XXV  
RIES OF 2022

ATTY. VIVIAN C. ENARIO-VIDALLON  
NOTARY PUBLIC  
NC. NO. 019-2017-0014, 2020  
UNTIL DECEMBER 31, 2021  
(Extended Until June 30, 2022)-B.M. 3795  
ROLL NO. 62930

CS FORM 212 (Revised 2017), Page 4 of 4













