

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	GATELA		
FIRST NAME	LESTER REY		NAME EXTENSION (JR., SR)
MIDDLE NAME	REGATO		
3. DATE OF BIRTH (mm/dd/yyyy)	02/06/2001	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization P/s. indicate country:
4. PLACE OF BIRTH	TACLOBAN CITY	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input 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	N/A ZONE 4 House/Block/Lot No. Street N/A BULOD Subdivision/Village Barangay SANTA FE LEYTE City/Municipality Province
7. HEIGHT (cm)	158	ZIP CODE	6513
8. WEIGHT (kg)	47	18. PERMANENT ADDRESS	N/A ZONE 4 House/Block/Lot No. Street N/A BULOD Subdivision/Village Barangay SANTA FE LEYTE City/Municipality Province
9. BLOOD TYPE	O	ZIP CODE	6513
10. GSIS ID NO.		19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.		20. MOBILE NO.	09569879552
12. PHILHEALTH NO.	13-250881721	21. E-MAIL ADDRESS (if any)	Lgatela01@gmail.com
13. SSS NO.	06-4419696-9		
14. TIN NO.	651301036		
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	NAME EXTENSION (JR., SR)	
MIDDLE NAME	N/A		
OCCUPATION	N/A		
EMPLOYER/BUSINESS NAME	N/A		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	N/A		
24. FATHER'S SURNAME	GATELA		
FIRST NAME	LOTGARDO	NAME EXTENSION (JR., SR) SR.	
MIDDLE NAME	GRESOLA		
25. MOTHER'S MAIDEN NAME			
SURNAME	REGATO		
FIRST NAME	ROSEMARIE		
MIDDLE NAME	MIA		

(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	BULOD ELEMENTARY SCHOOL	ELEMENTARY	2007	2013	N/A	2013	VALEDICTORIAN
SECONDARY JUNIOR HIGH SCHOOL	SANTA FE NATIONAL HIGH SCHOOL	JUNIOR HIGH SCHOOL	2013	2017	N/A	2017	WITH HONORS
SECONDARY SENIOR HIGH SCHOOL	PALO NATIONAL HIGH SCHOOL	ACCOUNTANCY, BUSINESS AND MANAGEMENT	2017	2019	N/A	2019	WITH HONORS
COLLEGE	LEYTE NORMAL UNIVERSITY	BACHELOR OF SECONDARY EDUCATION MAJOR IN FILIPINO	2019	2023	N/A	2023	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)


SIGNATURE		DATE	JUNE 27, 2024
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[illegible]

V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.


[illegible]

SIGNATURE		DATE	JUNE 27, 2024	
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[illegible]**VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED**[illegible]

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	COMMUNICATION SKILLS		N/A		N/A
	PROFFICIENT IN MICROSOFT WORD, EXCEL, POWERPIONT, OUTLOOK AND ACCESS				
	CRITICAL THINKING SKILLS				
	ATTENTION TO DETAIL				

SIGNATURE		DATE	JUNE 27, 2024
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<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <hr/> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="margin-left: 40px;">Date Filed: _____</p> <p style="margin-left: 40px;">Status of Case/s: _____</p>
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>
<p>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?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p>
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
ARLENE DALL T. MABANAG	TACLOBAN CITY	0908-813-3374
DR. ERNANI S. FERNANDEZ	PALO, LEYTE	0995-276-2673
MARIBEL L. OGAY	BULOD SANTA FE, LEYTE	0960-663-5680

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

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/License/Passport No.: 13-250881721-9
Date/Place of Issuance: SEPTEMBER 2023

Signature (Sign inside the box)
JUNE 27, 2024
Date Accomplished



Right Thumbmark

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

Person Administering Oath
