

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	CINCO		
FIRST NAME	FERNAN		NAME EXTENSION (JR., SR)
MIDDLE NAME	ESCOBAL		
3. DATE OF BIRTH (mm/dd/yyyy)	12/24/1989	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	ANAHAWAN, SOUTHERN LEYTE	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	1423 FLORENTINO TORRES ST. House/Block/Lot No. Street SAN ANDRES BUKID 807 Subdivision/Village Barangay MANILA CITY METRO MANILA City/Municipality Province
7. HEIGHT (m)	1.70 m	ZIP CODE	1017
8. WEIGHT (kg)	92 kg		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	N/A N/A House/Block/Lot No. Street TAGUP-ON Subdivision/Village Barangay ANAHAWAN SOUTHERN LEYTE City/Municipality Province
10. GSIS ID NO.	NONE	ZIP CODE	6610
11. PAG-IBIG ID NO.	121101709231		
12. PHILHEALTH NO.	13-050111641-7		
13. SSS NO.	06-3046435-9	19. TELEPHONE NO.	NONE
14. TIN NO.	297-472-729	20. MOBILE NO.	(0915) 688-8584
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	cinco.fernan05@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	CINCO			
FIRST NAME	ROMEO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	UMACOB			
25. MOTHER'S MAIDEN NAME				
SURNAME	ESCOBAL			
FIRST NAME	LOLITA			
MIDDLE NAME	CLARITO		(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	ANAHAWAN CENTRAL SCHOOL	PRIMARY EDUCATION	1996	2002	N/A	2002	4TH HONORABLE MENTION
SECONDARY	SAINT ANTHONY'S HIGH SCHOOL	HIGH SCHOOL	2002	2006	N/A	2006	1ST SPECIAL CITATION; EXCELLENCE IN MATHEMATICS
VOCATIONAL / TRADE COURSE							
COLLEGE	UNIVERSITY OF THE PHILIPPINES IN THE VISAYAS TACLOBAN COLLEGE	BACHELOR OF SCIENCE IN MANAGEMENT	2006	2010	N/A	2010	
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	August 11, 2021
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IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(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.

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	August 11, 2021
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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	
1. Name of the Program	
2. Description of the Program	
3. Date Attended	
4. Location	
5. Duration	
6. Facilitator	
7. Topics Covered	
8. Key Takeaways	
9. Application to Current Role	
10. Feedback Received	
11. Additional Comments	

[illegible]

(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)
TECHNICAL SAVVY & COMPUTER PROFICIENT	EMPLOYEE OF THE QUARTER Q1 2018 (HEALTHCARE SUPPORT)	UP HALCYON (Socio-Civic Organization)
INTERPERSONAL/ PEOPLE MANAGEMENT SKILL	A PLAYER AWARDS (PSG GLOBAL SOLUTIONS)	
PERFORMANCE MANAGEMENT	TELSTRA TOP PERFORMER 2013 (TELETECH)	
FILE AN DATABASE MANAGEMENT		
LEADERSHIP SKILLS		
LOVE TO DANCE TOO!		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	August 11, 2021
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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)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: I resigned from my last position at Teletech
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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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? b. Are you a person with disability? c. Are you a solo parent?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
Maria Imelda Orilla (LGOO II - DILG Southern Leyte)	Maasin City, Souther Leyte	(0956) 359-3696
Laser Blitz Sumagaysay (Third Secretary & Vice Consul - Philippine Embassy in Dili, Timor Leste)	Dili, Timor-Leste	(0906) 525-2176

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:	UNIFIED MULTI-PURPOSE ID
ID/License/Passport No.:	CRN-0111-5117965-6
Date/Place of Issuance:	NOT INDICATED

Signature (Sign inside the box)
August 11, 2021
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