

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)
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## I. PERSONAL INFORMATION

2. SURNAME	FRANCISCO		NAME EXTENSION (JR., SR)	
FIRST NAME	JOAN			
MIDDLE NAME	BALUGO			
3. DATE OF BIRTH (mm/dd/yyyy)	05/21/2001	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	HINDANG, 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	325 GABRIELA ST. House/Block/Lot No. Street DOOS DEL NORTE Subdivision/Village Barangay HINDANG LEYTE City/Municipality Province 6523	
7. HEIGHT (m)	1.57	ZIP CODE		
8. WEIGHT (kg)	55			
9. BLOOD TYPE	UNKNOWN	18. PERMANENT ADDRESS	325 GABRIELA ST. House/Block/Lot No. Street DOOS DEL NORTE Subdivision/Village Barangay HINDANG LEYTE City/Municipality Province 6523	
10. GSIS ID NO.	N/A	ZIP CODE		
11. PAG-IBIG ID NO.	N/A			
12. PHILHEALTH NO.	N/A			
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A	
14. TIN NO.	N/A	20. MOBILE NO.	09464856333	
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	joanb21@gmail.com	

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	FRANCISCO			
FIRST NAME	FRANKLIN	NAME EXTENSION (JR., SR)		
MIDDLE NAME	LABON			
25. MOTHER'S MAIDEN NAME				
SURNAME	BALUGO			
FIRST NAME	TERESITA			
MIDDLE NAME	ALBESA		(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	DOOS ELEMENTARY SCHOOL		2007	2013		2013	2ND HONORS
	SECONDARY	BONTOC NATIONAL HIGH SCHOOL		2013	2019		2019	WITH HIGH HONORS
	VOCATIONAL / TRADE COURSE							
	COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRIBUSINESS	2019	2023		2023	MAGNA CUM LAUDE
	GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	08/18/2023
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[illegible]

## V. WORK EXPERIENCE

[illegible]

SIGNATURE	<i>Xani So</i>	DATE	08/18/2023
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[illegible]

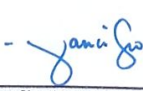
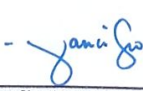
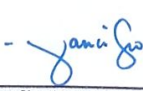



## VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[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)
WRITTEN & VERBAL COMMUNICATION	CERTIFICATE OF RECOGNITION AS SECRETARY OF THE	N/A
ORGANIZATION SKILLS	SOCIETY OF AGRIBUSINESS STUDENTS	
LEADERSHIP SKILLS		

SIGNATURE		DATE	08/18/2023
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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> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>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 checked="" 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>												
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>BRYAN R. GAPASIN</td> <td>VISCA, BAYBAY CITY, LEYTE</td> <td>09504142556</td> </tr> <tr> <td>JEKUS CABRADILLA</td> <td>BAGUIO DISTRICT, DAVAO CITY</td> <td>093574499380</td> </tr> <tr> <td>WELLA MARIE ALACIO</td> <td>BAYBAY CITY, LEYTE</td> <td>N/A</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	BRYAN R. GAPASIN	VISCA, BAYBAY CITY, LEYTE	09504142556	JEKUS CABRADILLA	BAGUIO DISTRICT, DAVAO CITY	093574499380	WELLA MARIE ALACIO	BAYBAY CITY, LEYTE	N/A
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<p>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.</p>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td>PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID: PHIL ID</td> </tr> <tr> <td>ID/License/Passport No.: 2153-0250-6843-5998</td> </tr> <tr> <td>Date/Place of Issuance: 08/29/2022</td> </tr> </table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)	PLEASE INDICATE ID Number and Date of Issuance	Government Issued ID: PHIL ID	ID/License/Passport No.: 2153-0250-6843-5998	Date/Place of Issuance: 08/29/2022	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">             Signature (Sign inside the box)            08/18/2023            Date Accomplished         </td> </tr> </table>	 Signature (Sign inside the box) 08/18/2023 Date Accomplished						
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<p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; width: 300px; height: 60px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>													