

## 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 ( ) ☐ 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	CIABU		
FIRST NAME	ELMER		NAME EXTENSION (JR., SR)
MIDDLE NAME	GARCIA		
3. DATE OF BIRTH (mm/dd/yyyy)	12/04/1981	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 checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street PALHI Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.70m	ZIP CODE	6521
8. WEIGHT (kg)	75	18. PERMANENT ADDRESS	House/Block/Lot No. Street PALHI Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
9. BLOOD TYPE	O	ZIP CODE	6521
10. GSIS ID NO.	NA	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	1211-1109-3974	20. MOBILE NO.	09813456034
12. PHILHEALTH NO.	13-050049953-3	21. E-MAIL ADDRESS (if any)	elmerciabu1204@gmail.com
13. SSS NO.	0111-1828766-4		
14. TIN NO.	937-623-750		
15. AGENCY EMPLOYEE NO.			

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	CIABU		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	DAISY	NAME EXTENSION (JR., SR)	CHLOE EMERALD B. CIABU	05/08/2013
MIDDLE NAME	BALBARINO		XIELO DAIMER B. CIABU	08/07/2015
OCCUPATION	TEACHER		LIAM SKYLER EMERSON B. CIABU	03/05/2020
EMPLOYER/BUSINESS NAME	DEPED BAYBAY CITY DIVISION			
BUSINESS ADDRESS	DIVERSION ROAD BRGY. GAAS BAYBAY CITY LEYTE			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	CIABU			
FIRST NAME	JOSE	NAME EXTENSION (JR., SR)		
MIDDLE NAME	ORACION			
25. MOTHER'S MAIDEN NAME				
SURNAME	GARCIA			
FIRST NAME	ROSALINA			
MIDDLE NAME	IBANEZ			

(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	PALHI ELEM. SCHOOL	PRIMARY EDUCATION	1989	1995	GRADUATED	2004	NONE
SECONDARY	POMPONAN NATIONAL HIGH SCHOOL	HIGH SCHOOL	1995	1999	GRADUATED	2009	NONE
VOCATIONAL / TRADE COURSE	TECNOLOGICAL VOCATION SCHOOL TACLOBAN CITY	NC II IN DRIVING	SEPT. 2015	OCT. 2015	NC II HOLDER	2015	NONE
COLLEGE	NA						
GRADUATE STUDIES	NA						

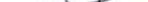
(Continue on separate sheet if necessary)

SIGNATURE		DATE	01-16-24	CS FORM 212 (Revised 2017), Page 1 of 4
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[illegible]

## V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	01-16-24	CS FORM 212 (Revised 2017), Page 2 of 4
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29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	NA				NA
	NA				NA

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

[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)
DRIVING	NA	NA
COOKING		
PLAYING BASKETBALL		







(Continue on separate sheet if necessary)

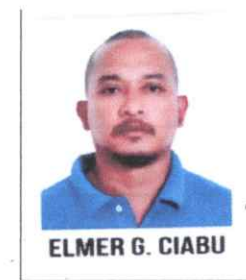


DATE \_\_\_\_\_

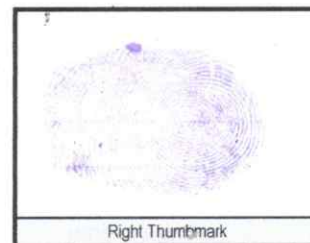
01-16-24



<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="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">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: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>BRENDA B. ALMERODA</td> <td>SR. SCIENCE RESEARCH SPECIALIST, DA ABUYOG EX. STATION, ABUYOG LEYTE</td> <td>09173217357</td> </tr> <tr> <td>JULIUS ABELA</td> <td>CHIEF, UNIVERSITY DISASTER RISK REDUCTION MANAGEMENT, SAFETY AND WORKS VISAYAS STATE UNIVERSITY VISCA BAYBAY CITY LEYTE</td> <td></td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	BRENDA B. ALMERODA	SR. SCIENCE RESEARCH SPECIALIST, DA ABUYOG EX. STATION, ABUYOG LEYTE	09173217357	JULIUS ABELA	CHIEF, UNIVERSITY DISASTER RISK REDUCTION MANAGEMENT, SAFETY AND WORKS VISAYAS STATE UNIVERSITY VISCA BAYBAY CITY LEYTE				
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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>													
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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>													



PHOTO



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