

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	DE CAIMAN		
FIRST NAME	MARIANNE JOYCE	NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	LUZON		
3. DATE OF BIRTH (mm/dd/yyyy)	09/08/1994	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	INOPACAN, 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	CENTRO House/Block/Lot No. Street GUADALUPE Subdivision/Village Barangay INOPACAN LEYTE City/Municipality Province ZIP CODE 6522
7. HEIGHT (m)	1.55	18. PERMANENT ADDRESS	CENTRO House/Block/Lot No. Street GUADALUPE Subdivision/Village Barangay INOPACAN LEYTE City/Municipality Province ZIP CODE 6522
8. WEIGHT (kg)	72	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	O	20. MOBILE NO.	+63 9184603086
10. GSIS ID NO.	N/A	21. E-MAIL ADDRESS (if any)	ennairamjoyce08@gmail.com
11. PAG-IBIG ID NO.	121165814434		
12. PHILHEALTH NO.	13-050173186-3		
13. SSS NO.	06-3714857-1		
14. TIN NO.	478-515-076		
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		NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	DE CAIMAN			
FIRST NAME	NESTOR	NAME EXTENSION (JR., SR)		
MIDDLE NAME	LADRERA			
25. MOTHER'S MAIDEN NAME				
SURNAME	LUZON			
FIRST NAME	ANECITA			
MIDDLE NAME	SAPIRO			

(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	INOPACAN CENTRAL SCHOOL	PRIMARY EDUCATION	2011	2007	Grade VI	2007	N/A
SECONDARY	INOPACAN NATIONAL HIGH SCHOOL	SECONDARY EDUCATION	2007	2011	Forth Year	2011	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A					
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN COMPUTER SCIENCE	2011	2016	Bachelor Degree	2016	N/A
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	10/11/23
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[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	10/11/23
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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(s)	
7. Participants	
8. Objectives	
9. Key Takeaways	
10. Action Items	
11. Feedback	
12. Other Comments	

[illegible]

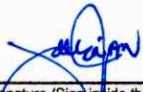
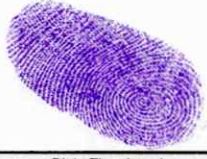
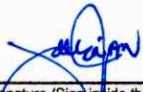
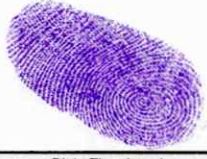
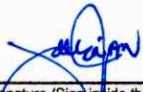
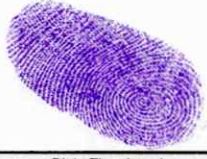
(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Reading Books / eBooks	N/A	N/A
Dancing & Singing		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	10/11/23
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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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><u>Resignation & Finished Contract</u></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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>Joycee Lou Lopez</td> <td>Danao City, Cebu</td> <td>9176714885</td> </tr> <tr> <td>Loida Clamor</td> <td>Abu Dhabi, UAE</td> <td>971 56 953 1567</td> </tr> <tr> <td>Antonio P. Abamo</td> <td>Visca, Baybay City Leyte</td> <td>9209835693</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Joycee Lou Lopez	Danao City, Cebu	9176714885	Loida Clamor	Abu Dhabi, UAE	971 56 953 1567	Antonio P. Abamo	Visca, Baybay City Leyte	9209835693
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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>													