

## 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	ABEDEJOS		
FIRST NAME	MARY ANNE	NAME EXTENSION (JR., SR.)	
MIDDLE NAME	CLAVERIA		
3. DATE OF BIRTH (mm/dd/yyyy)	1/5/1998	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" 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	Philippines	
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	House/Block/Lot No. Street CLUSTER 5 MA-ASIN Subdivision/Village Barangay HINDANG LEYTE City/Municipality Province
7. HEIGHT (m)	1.54	ZIP CODE	6523
8. WEIGHT (kg)	60 kgs	18. PERMANENT ADDRESS	House/Block/Lot No. Street CLUSTER 5 MA-ASIN Subdivision/Village Barangay HINDANG LEYTE City/Municipality Province
9. BLOOD TYPE	A+	ZIP CODE	6523
10. GSIS ID NO.	NOT APPLICABLE	19. TELEPHONE NO.	NOT APPLICABLE
11. PAG-IBIG ID NO.	121257835597	20. MOBILE NO.	09100436618
12. PHILHEALTH NO.	13-025519042-4	21. E-MAIL ADDRESS (if any)	anneabedejos@gmail.com
13. SSS NO.	34-8735274-7		
14. TIN NO.	752-760-815		
15. AGENCY EMPLOYEE NO.	NOT APPLICABLE		

### 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	N/A
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	ABEDEJOS			
FIRST NAME	ANTONIO	NAME EXTENSION (JR., SR.) JR.		
MIDDLE NAME	QUEROBIN			
25. MOTHER'S MAIDEN NAME				
SURNAME	CLAVERIA			
FIRST NAME	MARCELA			
MIDDLE NAME	N/A			

(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	MA-ASIN ELEMENTARY SCHOOL	PRIMARY EDUCATION	2009	2010	N/A	2010	N/A
SECONDARY	HILONGOS NATIONAL VOCATIONAL SCHOOL	HIGH SCHOOL	2010	2014	N/A	2014	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRIBUSINESS	2015	2019	N/A	2019	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	January 10, 2022
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## IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

## V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/10/2022
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[illegible]**VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED**

*(Start from the most recent L&D training program and include only the relevant L&D training taken for the last five (5) years for Division Chief/Executive/Managerial positions)*

(Continue on separate sheet if necessary)

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
ADOBE PHOTOSHOP EDITING	N/A	N/A
COMPUTER LITERACY (MICROSOFT WORD, EXCEL, POWERPOINT & ETC.)	SCUAA PLAYER	VSU SOFTBALL TEAM
ONLINE SELLING	N/A	N/A
TRAVELLING & PHOTOGRAPHY	N/A	N/A

SIGNATURE		DATE	01/11/2022
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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)?

☐ YES ☒ NO  
☐ YES ☒ 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?

☐ YES ☒ NO  
If YES, give details: \_\_\_\_\_

☐ YES ☒ 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?

☐ YES ☒ 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?

☐ YES ☒ NO  
If YES, give details: \_\_\_\_\_

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?

☐ YES ☒ NO  
If YES, give details: \_\_\_\_\_

☐ YES ☒ NO  
If YES, give details: \_\_\_\_\_

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES ☒ 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:  
Are you a member of any indigenous group?  
Are you a person with disability?  
Are you a solo parent?

☐ YES ☒ NO  
If YES, please specify: \_\_\_\_\_

☐ YES ☒ NO  
If YES, please specify ID No.: \_\_\_\_\_

☐ YES ☒ NO  
If YES, please specify ID No.: \_\_\_\_\_

41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)

NAME	ADDRESS	TEL. NO.
MARY KATHERINE SAPERO	DES MARKETING	9552492306
FLORIANNE MAE VILLARUEL	VISCA, BAYBAY	9639607933
MYRNA ABASOLA	DTI-HINDANG	9182356519

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.



Government Issued ID (e.g. Passport, GSS, SSS, PRC Driver's License, etc.)  
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: TIN NO.  
ID/License/Passport No.: 752-760-815  
Date/Place of Issuance: 09/30/2019

Signature (Sign inside the box)  
01/10/2022  
Date Accomplished



SUBSCRIBED AND SWORN to before me this January 10, 2022, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath