

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	BENGALAN		
FIRST NAME	MONNA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ESPINOSA		
3. DATE OF BIRTH (mm/dd/yyyy)	8/29/1994	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	BAYBAY, LEYTE	If holder of dual citizenship, please indicate the details.	Please indicate country:
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	House/Block/Lot No. Street PATAG Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.56	ZIP CODE	6521
8. WEIGHT (kg)	96		
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS	House/Block/Lot No. Street PATAG Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6521
11. PAG-IBIG ID NO.	121147148075		
12. PHILHEALTH NO.	13-250364103-1	19. TELEPHONE NO.	NONE
13. SSS NO.	06-3699475-5	20. MOBILE NO.	09757395249
14. TIN NO.	324-744-688-0000	21. E-MAIL ADDRESS (if any)	monnabengalan@gmail.com
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	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	BENGALAN			
FIRST NAME	ANTONIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	POLIQUIT			
25. MOTHER'S MAIDEN NAME				
SURNAME	ESPINOSA			
FIRST NAME	MELCHORA			
MIDDLE NAME	PASOHIL		(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	PATAG ELEMENTARY SCHOOL	PRIMARY	2001	2007	N/A	2007	SALUTATORIAN
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	SECONDARY	2007	2011	N/A	2011	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 STATISTICS	2011	2015	N/A	2015	N/A
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER IN AGRICULTURAL DEVELOPMENT	2019	Present	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE	DATE	CS FORM 212 (Revised 2017), Page 1 of 4
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
N/A					

(Continue on separate sheet if necessary)

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)

30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	Document Tracking System	11/13/2020	11/13/2020	3.0		Visayas State University
	Webinar on Statistics: Bayesian Analysis	10/15/2020	10/15/2020	3.0	Statistical	University of the Philippines Cebu
	Webinar on Social Media Management for Government Agencies-Communicate and Keep Clients Updated	10/14/2020	10/14/2020	3.0		Department of Information and Communications Technology - Visayas Cluster 2
	Training on Identification of proper and complete items Technical Specification and parameters and orientation of the Purchase Request (PR) Module	8/28/2020	8/28/2020			Visayas State University
	Training Course on Basic Statistical Methods using R Commander	06/17/2019	06/21/2019	40.0	Statistical	Visayas State University and Philippine Statistical Research and Training Institute
	Seminar-Workshop on Open Data Kit (ODK)	03/07/2019	03/07/2019	8.0	Statistical	Paulo G. Batidor, Department of Statistics
	Orientation Workshop Among JO Clerks and Laboratory Technicians	01/15/2019	01/15/2019	8.0		Visayas State University
	Social Capital as a Determinant of Civic Engagement: A Cross-Cultural Analysis	07/27/2018	07/27/2018	4.0	Statistical	Institute for Strategic Research and Development Studies
	LaForeT Community Level Research Training Workshop	08/17/2016	08/19/2016	32.0	Forest Operation	Visayas State University and Thünen Institute


(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)
	DATA ANALYSIS		N/A		N/A
	EDITING PICTURES				
	MANAGING PROGRAMS/ACTIVITIES				
	GARDENING				

(Continue on separate sheet if necessary)



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: End of Contract _____	
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.
REMBERTO A. PATINDOL	GABAS, BAYBAY CITY, LEYTE	09176341454
NORBERTO E. MILLA	KILBOURNE DRIVE, VISCA, VISAYAS STATE UNIVERSITY	09358590890
VIRGELIO M. ALAO	GABAS, BAYBAY CITY, LEYTE	9102000484
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 (i.e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: UMID ID/License/Passport No.: CRN-0111-5040954-7 Date/Place of Issuance:	<div>Signature (Sign inside the box)</div> <div>Date Accomplished</div>	
<div>ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size) With full and handwritten name tag and signature over printed name Computer generated or photocopied picture is not acceptable</div> <div>PHOTO</div> <div> Right Thumbmark</div>		
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.		
<div>Person Administering Oath</div>		