

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	Camandona		
FIRST NAME	Nina Mae	NAME EXTENSION (JR., SR)	
MIDDLE NAME	Frutas		
3. DATE OF BIRTH (mm/dd/yyyy)	01/25/1998	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	Baybay, Leyte	If holder of dual citizenship, please indicate the details.	Philippines ▼
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	Emilio Jacinto St., House/Block/Lot No. Street Zone 21 Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
7. HEIGHT (m)	162	ZIP CODE	6521
8. WEIGHT (kg)	51		
9. BLOOD TYPE	AB	18. PERMANENT ADDRESS	Emilio Jacinto St., House/Block/Lot No. Street Zone 21 Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
10. GSIS ID NO.	n/a	ZIP CODE	6521
11. PAG-IBIG ID NO.			
12. PHILHEALTH NO.	132503565963	19. TELEPHONE NO.	053-563-0157
13. SSS NO.	06-4149406-2	20. MOBILE NO.	0935-584-1213
14. TIN NO.	349-973-897-000	21. E-MAIL ADDRESS (if any)	ninamaecamandona@gmail.com
15. AGENCY EMPLOYEE NO.	2017-070402		

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	
MIDDLE NAME	n/a			
OCCUPATION	n/a			
EMPLOYER/BUSINESS NAME	n/a			
BUSINESS ADDRESS	n/a			
TELEPHONE NO.	n/a			
24. FATHER'S SURNAME	Camandona			
FIRST NAME	Arnie	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Dajao			
25. MOTHER'S MAIDEN NAME				
SURNAME	Frutas			
FIRST NAME	Merly			
MIDDLE NAME	Alidro		(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	Pres. Carlos P. Garcia Elementary School		2006	2010		2010	Valedictorian
SECONDARY	Baybay National High School		2010	2014		2014	Salutatorian
VOCATIONAL / TRADE COURSE	n/a	n/a	n/a	n/a	n/a	n/a	n/a
COLLEGE	University of San Carlos	Bachelor of Science in Psychology	2014	2018		2018	Cum Laude
GRADUATE STUDIES	University of San Jose-Recoletos	Juris Doctor of Law	2019	present		n/a	n/a

(Continue on separate sheet if necessary)

SIGNATURE		DATE	08/19/2020
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IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	8/19/2020
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

[illegible][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)
Cooking	n/a	People Management Association of the Philippines
Reading		Ramon Aboitiz Foundation, Inc. (RAFI)
Travel		
Drawing, sketching and painting		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	08/19/2020
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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>Resigned because the company is out of service</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>Anna Mae Labadan</td> <td>Cebu City</td> <td>9557259461</td> </tr> <tr> <td>Yza Gabrinez</td> <td>Cebu City</td> <td>9153198830</td> </tr> <tr> <td>Louise Marie Moran</td> <td>Cebu City</td> <td>9224963693</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Anna Mae Labadan	Cebu City	9557259461	Yza Gabrinez	Cebu City	9153198830	Louise Marie Moran	Cebu City	9224963693
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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 colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td colspan="2">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID:</td> <td>UMID- 0111-9135429-5</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>P0709552B</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>Cebu City</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:	UMID- 0111-9135429-5	ID/License/Passport No.:	P0709552B	Date/Place of Issuance:	Cebu City	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">  Signature (Sign inside the box) </td> </tr> <tr> <td style="text-align: center;"> 08/19/2020 Date Accomplished </td> </tr> </table>	 Signature (Sign inside the box)	08/19/2020 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: 250px; height: 60px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>													



PHOTO

