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		NATI HOL applicable. BO NOT A	ADDICE VIATE.		1.0010140.		(Bo not in up. 1	or coc use only)	
2. SURNAME	PESERAL								
FIRST NAME	ABEGAIL		NAME EXTENSION (JR., SR) N/A						
MIDDLE NAME	OLIVA								
DATE OF BIRTH (mm/dd/yyyy)	05/29/1998		✓ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization						
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citizen	nship,	☐ by birth ☐ by nat Pls. indicate country:				ization	
5. SEX	☐ Male ☑ Female	please indicate the de	etails.					•	
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS			N/A				
	☐ Widowed ☐ Separated				ise/Block/Lot No. N/A			Street IGANG	
	Other/s:	-		bdivision/Village AYBAY CITY			Barangay LEYTE		
7. HEIGHT (m)	1.63				ty/Municipality				
8. WEIGHT (kg)	53	ZIP CODE		6521					
9. BLOOD TYPE	0	18. PERMANENT ADDRESS	Hou	N/A se/Block/Lot N	0.		N/A Street		
10. GSIS ID NO.	N/A		N/A Subdivision/Village				IGANG Barangay		
11. PAG-IBIG ID NO.	N/A		B/	AYBAY CITY ty/Municipality			LEYTE Province		
12. PHILHEALTH NO.	N/A	ZIP CODE		,		6521			
13. SSS NO.	N/A	19. TELEPHONE NO.		N/A					
14. TIN NO.	N/A	20. MOBILE NO.		09268669127					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)		peseralabegail@gmail.com					
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	N/A		23. NAME of CH	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			N/A		
MIDDLE NAME		•							
OCCUPATION									
EMPLOYER/BUSINESS NAME									
BUSINESS ADDRESS									
TELEPHONE NO.									
24. FATHER'S SURNAME	PESERAL								
FIRST NAME	NATANAEL	NAME EXTENSION (JR., SR) N/A							
MIDDLE NAME	MARZON	•							
25. MOTHER'S MAIDEN NAME									
SURNAME	OLIVA								
FIRST NAME	SONIA								
MIDDLE NAME	CABALTERA		(Continue on separate sheet if necessary)						
III. EDUCATIONAL BACKGE	ROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF A	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	IGANG ELEMENTARY SCHOOL	PRIMARY EDUCATION		2004	2010		2010	SECOND HONORABLE MENTION	
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	HIGH SCHOOL		2010	2014		2014	N/A	
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A		N/A	N/A	
COLLEGE	VISAYAS STATE UNIVERSITY	TE UNIVERSITY BS COMPUTER SCI		2015	2020		2020	LOCAL GOVERNMENT UNIT SCHOLAR	
GRADUATE STUDIES	N/A N//A			N/A	N/A		N/A	N/A	
		Continue on separate sheet if nece	essary)						
SIGNATURE	ateurah			DA	TE	Ma	arch 15, 2021		

IV. CIVIL SE	RVICE ELIG	IBILITY							
	SPECIAL LAV	080 (BOARD/ BAR) UNDER NS/ CES/ CSEE	RATING (If Applicable)	DATE OF EXAMINATION /	PLACE OF EXAMINATION / CONFERMENT			LICENSE (if ap	Date of
BAR		TY / DRIVER'S LICENSE		CONFERMENT			NUMBER	Validity	
	DRIVER'S L	LICENSE	N/A	03/03/2020	LAND TRANSPORTATION OFFICE, BAYBAY		H12-20-001569	05/29/2024	
V W08V 5	Vacalenae		(Con	tinue on separate sheet	if necessary)				
	XPERIENCE ate employme	nt. Start from your recer	nt work) Descriptio	on of duties should	be indicated in the attach	ned Work Ex	perience she	et.	
28. INCLU	SIVE DATES n/dd/yyyy)	POSITION TI	TLE	DEPARTMENT / AGE	ENCY / OFFICE / COMPANY /Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
From	То				d Development Office -		INCREMENT	_	
9/29/2020	3/15/2021	Staff			J, Baybay	350 per day	N/A	Emergency	Y
		1		1					
			(Cor	ntinue on separate sheet	if necessary)	<u> </u>			
SIGNATURE		the seal		DATE	March 15, 2021 CS FORM 212 (Revised				

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		(mm/d	INCLUSIVE DATES (mm/dd/yyyy) From To			POSITION / NATURE OF WORK	
N/A			To N/A	N/A		N/A	
II/A				14/1			
		tinue on separate s					
VII. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PR						
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
N/A		From N/A	To N/A	N/A	N/A	N/A	
				14,21			
	(Con:	tinue on separate s	hoot if nocessary				
VIII. OTHER INFORMATION	, com		,				
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
BASIC PROGRAMMING	N/A				N/A		
TEACHING							
READING							
	(00)	tinue on separate s	thoot if necessari				
SIGNATURE			eet ii necessary)		ATE	March 15, 2021	

34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediat Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Cal	_	☑ NO ☑ NO s:						
35.	a. Have you ever been found guilty of any administrative of	☐ YES ☑ NO If YES, give details:							
	b. Have you been criminally charged before any court?	☐ YES ☑ NO If YES, give details: Date Filed: Status of Case/s:							
36.	Have you ever been convicted of any crime or violation of a by any court or tribunal?	☐ YES ☑ NO If YES, give details:							
37.	retirement, dropped from the rolls, dismissal, termination, e 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 ele Barangay election)?	YES If YES, give detail	✓ NO ils:						
	b. Have you resigned from the government service during to election to promote/actively campaign for a national or local	☐ YES ☑ NO If YES, give details:							
39.	Have you acquired the status of an immigrant or permanen	☐ YES ☑ NO If YES, give details (country):							
40. a. b. c.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972) Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐ YES							
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)							
	NAME	ADDRESS	TEL. NO.						
	NOEL N. SOSMEÑA	BRGY. MAKINHAS, BAYBAY CITY, LEYTE	9757707051						
	KRISTINE SHAYNE A. CASTOS	BRGY. HIPUSNGO, BAYBAY CITY, LEYTE							
42	LYCA S. ABARQUEZ	BRGY. GAAS, BAYBAY CITY, LEYTE	9171156830						
42.	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.								
G II	Covernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Covernment Issued ID: DRIVER'S LICENSE D/License/Passport No.: H12-20-001569 Date/Place of Issuance: 03/03/2020	ox)	Right Thumbmark						
	SUBSCRIBED AND SWORN to before me this	ting his/her validly issued	government ID as indicated above.						
		th							