

PERSONAL DATA SHEET

WARNING: Any misinterpretation 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	PACALDO		
FIRST NAME	JHONLESTER		NAME EXTENSION (JR., SR)
MIDDLE NAME	MABALI		
3. DATE OF BIRTH (mm/dd/yyyy)	3/17/1996	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	ISABEL, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input 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	BLK 17, LOT 34 House/Block/Lot No. Street RISE INFINITY GROOVE MARGEN Subdivision/Village Barangay ORMOC LEYTE City/Municipality Province
7. HEIGHT (m)	5'1	ZIP CODE	6541
8. WEIGHT (kg)	67 KG		
9. BLOOD TYPE		18. PERMANENT ADDRESS	BLK 17, LOT 34 House/Block/Lot No. Street RISE INFINITY GROOVE MARGEN Subdivision/Village Barangay ORMOC LEYTE City/Municipality Province
10. GSIS ID NO.		ZIP CODE	6541
11. PAG-IBIG ID NO.	1211-7286-9117		
12. PHILHEALTH NO.	130501842185		
13. SSS NO.	34-6003049-7	19. TELEPHONE NO.	NA
14. TIN NO.	333-079-983	20. MOBILE NO.	09097752863/09060528746
15. AGENCY EMPLOYEE NO.	E160021	21. E-MAIL ADDRESS (if any)	jhonlestermabali@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	NA		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NA	NAME EXTENSION (JR., SR)	NA	NA
MIDDLE NAME	NA		NA	NA
OCCUPATION	NA		NA	NA
EMPLOYER/BUSINESS NAME	NA		NA	NA
BUSINESS ADDRESS	NA		NA	NA
TELEPHONE NO.	NA		NA	NA
24. FATHER'S SURNAME	PACALDO		NA	NA
FIRST NAME	GERRY	NAME EXTENSION (JR., SR)	NA	NA
MIDDLE NAME	MALINGIN		NA	NA
25. MOTHER'S MAIDEN NAME			NA	NA
SURNAME	MABALI		NA	NA
FIRST NAME	TITA		NA	NA
MIDDLE NAME	TABURADA		(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	CAMP DOWNES ELEMENTARY SCHOOL	PRIMARY	6/3/2002	3/28/2008	GRADUATED	2008	
SECONDARY	NEW ORMOC CITY NATIONAL HIGH SCHOOL	SECONDARY	6/7/2004	3/30/2012	GRADUATED	2012	
VOCATIONAL / TRADE COURSE	TECHNICAL EDUCATIONAL AND SKILLS DEVELOPMENT AUTHORITY	NATIONAL CERTIFICATE II - COOKERY	3/7/2016	5/20/2016	COMPLETED	2016	
COLLEGE	EASTERN VISAYAS STATE UNIVERSITY	BACHELOR OF TEACHING HOME ECONOMICS AND LIVELIHOOD EDUCATION	6/4/2012	4/6/2016	GRADUATED	2016	CONGRES SIONAL
GRADUATE STUDIES	PALOMPON INSTITUTE OF TECHNOLOGY	MASTER OF ARTS EDUCATION MAJOR IN TECHNOLOGY EDUCATION	6/2/2018		18 Units		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	May 17, 2021
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[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE	
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DATE _____

May 17, 2021

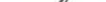
[illegible]

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. ASSOCIATION/ORGANIZATION (Write in full)
Cooking	Top 2 Borrower for the Month of June to November 2016 for the National Book Week	NA
Baking	Committee during the Intramurals 2018 at St. Peter's College of Ormoc	NA
	GENYO Teacher for the Month of August 2018	NA
	Employee Awardee for the Academic Year 2017 - 2018 for promptness in coming to school	NA
	Committee during the Intramurals 2019 at St. Peter's College of Ormoc	NA
	Guest of Honor during the 2019 Graduation Ceremony of Grade 6 pupils at Camp Downes Elementary School	NA
		NA

SIGNATURE		DATE	May 17, 2021
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34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person who has immediate supervision over you in the 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
a. Are you a member of any indigenous group?

b. Are you a person with disability?

c. 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.
Mr. Mark Anthony B. Malinao	Brgy. Simangan, Ormoc City	9453372529
Mrs. Genevie M. Jaculbe	Brgy. Dayhagan Ormoc City	9305707292
Mrs. Alicia Dejaño Stamm	Brgy. Bantigue,Ormoc City	9175714637/ 053-520-7011


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: PRC

ID/License/Passport No.: 1487143


Date/Place of Issuance: 12/09/2016 Tacloban City




Signature (Sign inside the box)

May 17, 2021

Date Accomplished



Right Thumbmark



JHONVESTER M. PACALDO

PHOTO

SUBSCRIBED AND SWORN to before me this 17 MAY 2021, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. JOSEPH KIRBY L. CALIPAYAN

Public Attorney III

Pursuant to RA 9406

Person Administering Oath