

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	ARQUILLANO JR		
FIRST NAME	SIMPROSO		
MIDDLE NAME	ANDRADE		
3. DATE OF BIRTH (mm/dd/yyyy)	06/03/1984	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	INOPACAN, 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	B6 L13 SOUTH1 BANGLADESH ST House/Block/Lot No. Street SAN MARINO CITY SALAWAG Subdivision/Village Barangay DASMARINAS CAVITE City/Municipality Province 4114
7. HEIGHT (m)	1.5	18. PERMANENT ADDRESS	PUROK 2 House/Block/Lot No. Street GUADALUPE Subdivision/Village Barangay INOPACAN LEYTE City/Municipality Province 6522
8. WEIGHT (kg)	56		
9. BLOOD TYPE	0+		
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	102001685586		
12. PHILHEALTH NO.	10515330041	ZIP CODE	
13. SSS NO.	34-0004831-3	19. TELEPHONE NO.	N/A
14. TIN NO.	251-001-586	20. MOBILE NO.	09616390872
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	zim.jhe@gmail.com

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		NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	ARQUILLANO SR			
FIRST NAME	SIMPOROSO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	BULACAN			
25. MOTHER'S MAIDEN NAME				
SURNAME	ANDRADE			
FIRST NAME	LILIA			
MIDDLE NAME	PORAZO		(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)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	GUADALUPE ELEMENTARY SCHOOL	PRIMARY EDUCATION	1990	1996		1996	WITH HONOR
SECONDARY	CONALUM NATIONAL HIGH SCHOOL	HIGH SCHOOL	1996	2000		2000	WITH HONOR
VOCATIONAL / TRADE COURSE	MLG INSTITUTE OF LEARNING	1YR OFFICE MANAGEMENT (DATA ENCODER)	2001	2002		2002	RECIPIENT OF
COLLEGE	MLG COLLEGE OF LEARNING	BACHELOR OF SCIENCE IN INFORMATION AND TECHNOLOGY	2002	2005		2005	
GRADUATE STUDIES	N/A	N/A					

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	

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	N/A	N/A	N/A	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			
	Work and Business Ethics	Mar18, 2024	Mar18, 2024	1.5 HRS	Managerial	Genxp
	Microsoft Digital Literacy	Apr 25, 2024	Apr 29, 2024	8.0HRS	Technical	E-Tesda
	Administrative Assistant Training	Apr14, 2024	May 04, 2024	80.0 HRS	Technincal	Prima Excellence
	Leading in a Dynamic Work Environment	Jun 08, 2024	Jun 08, 2024	3.0HRS	Managerial	Knowledge Horizons PH
	Disbursing Officer Cashflow Management	Jul 25, 2024	Jul 26, 2024	4.0 hrs	Technical	Stellar Training Consultancy Service
	Junior Accounting and Bookeping 101	July 29, 2024	July 29, 2024	3.0 hrs	Technical	MST Connect Educational Consultancy





(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Professional cash handling	N/A		N/A
	Basic accounting	N/A		N/A
	Computer literacy	N/A		N/A
	Customer service	N/A		N/A
	Written and oral communication	N/A		N/A
	Innovative	N/A		N/A
	Organizational	N/A		N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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<div>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)?</div>		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:</div></div>															
<div>35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?</div>		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:</div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:</div></div>															
<div>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</div>		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:</div></div>															
<div>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</div>		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:</div></div>															
<div>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?</div>		<div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:</div></div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details:</div></div></div>															
<div>39. Have you acquired the status of an immigrant or permanent resident of another country?</div>		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details (country):</div></div>															
<div>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?</div>		<div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify:</div></div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify ID No:</div></div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify ID No:</div></div></div>															
<div>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</div> <table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>REX ORDO - MLHUILLIER, Area Manager</td><td>GMA CAVITE</td><td>9190762026</td></tr><tr><td>ROBINSON ALPECHE - DEPED CAVITE, Admin Ass</td><td>GEN.TRIAS CAVITE</td><td>9611978562</td></tr><tr><td>BELINDA LIM - DEPED LEYTE, Master Teacher 1</td><td>INOPACAN LEYTE</td><td>9068144111</td></tr></table>				NAME	ADDRESS	TEL. NO.	REX ORDO - MLHUILLIER, Area Manager	GMA CAVITE	9190762026	ROBINSON ALPECHE - DEPED CAVITE, Admin Ass	GEN.TRIAS CAVITE	9611978562	BELINDA LIM - DEPED LEYTE, Master Teacher 1	INOPACAN LEYTE	9068144111		
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<div>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.</div>		<div><div><div>SIMPROSO A. ARGUILLANO JR.</div></div><div>PHOTO</div></div>															
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<div>SUBSCRIBED AND SWORN to before me this</div>		<div>Right Thumbmark</div>															
<div>, affiant exhibiting his/her validly issued government ID as indicated above.</div>		<div>Person Administering Oath</div>															