

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	PASA		
FIRST NAME	ELIZABETH	NAME EXTENSION (JR., SR)	
MIDDLE NAME	DIZON	N/A	
3. DATE OF BIRTH (mm/dd/yyyy)	01/15/1994	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	BRGY., BIASONG, BAYBAY, LEYTE	If holder of dual citizenship, please indicate the details.	
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	PUROK 1 SAGKAAN
7. HEIGHT (m)	1.524 m	House/Block/Lot No.	Street
8. WEIGHT (kg)	40 kg	Subdivision/Village	BIASONG
9. BLOOD TYPE	A+	BAYBAY	Barangay
10. GSIS ID NO.	2006340375	City/Municipality	LEYTE
11. PAG-IBIG ID NO.	1211-4771-9918		Province
12. PHILHEALTH NO.	12-051454819-1	ZIP CODE	6521
13. SSS NO.	0637123787	18. PERMANENT ADDRESS	N/A
14. TIN NO.	322-989-480-000	House/Block/Lot No.	PUROK 1 SAGKAAN
15. AGENCY EMPLOYEE NO.	V02112	N/A	Street
		Subdivision/Village	BIASONG
		BAYBAY	Barangay
		City/Municipality	LEYTE
			Province
		ZIP CODE	6521
		19. TELEPHONE NO.	N/A
		20. MOBILE NO.	09280831200
		21. E-MAIL ADDRESS (if any)	elyoung231@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	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	PASA			
FIRST NAME	MARCIAL	NAME EXTENSION (JR., SR)		
MIDDLE NAME	CALDERON			
25. MOTHER'S MAIDEN NAME				
SURNAME	DIZON			
FIRST NAME	PERLITA			
MIDDLE NAME	ASEGENTE		(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 GRADUAT ED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	HIPUSNGO ELEMENTARY SCHOOL	PRIMARY EDUCATION	2001	2006	GRADUATED	2006	WITH HONOR
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	HIGH SCHOOL	20016	2010	GRADUATED	2010	VALEDICTORIAN
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	UNIVERSITY OF CEBU-BANILAD CAMPUS	BACHELOR OF SCIENCE IN ACCOUNTANCY	2010	2010	UNITS EARNED	N/A	N/A
	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRIBUSINESS	2011	2015	GRADUATED	2015	NONE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)	
SIGNATURE	DATE
	May 3, 2024

IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE	
1. Name of Employer	
2. Address	
3. City	
4. State	
5. Zip	
6. Dates Employed	
7. Position Held	
8. Description of Duties	
9. Supervisor's Name	
10. Supervisor's Address	
11. Supervisor's City	
12. Supervisor's State	
13. Supervisor's Zip	
14. Supervisor's Title	
15. Supervisor's Phone Number	
16. Supervisor's Fax Number	
17. Supervisor's E-mail Address	
18. Supervisor's Signature	
19. Supervisor's Title	
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162. Supervisor's Signature	
163. Supervisor's Title	
164. Supervisor's Address	
16	

(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 _____

May 3, 2024

[illegible]







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

[illegible]

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	COMMUNICATION SKILLS		TOP AGENT FOR THE MONTH OF MARCH FY20 - WIPRO CEBU, PHILIPPINES		N/A
	COMPUTER SKILLS		TOP AGENT PERFORMER FOR THE Q4 FY19-WIPRO CEBU, PHILIPPINES		
			TOP AGENT FOR THE MONTH OF DECEMBER FY19 - WIPRO CEBU, PHILIPPINES		
			TOP NPS PERFORMER FOR MONTH OF MAY 2017-WIPRO CEBU, PHILIPPINES		
			OUTSTANDING PERFORMANCE FOR JUNE 2016 -WIPRO CEBU, PHILIPPINES		
			TOP NPS CONTRIBUTOR/OUTSTANDING PERFORMANCE WB JULY 23 - WIPRO		
			TOP NPS CONTRIBUTOR/OUTSTANDING PERFORMANCE WB JUNE 18 - WIPRO		

SIGNATURE		DATE	05/03/2024
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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 type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<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 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)															
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>NICK FREDDY R. BELLO</td><td>VISAYAS STATE UNIVERSITY</td><td>9353256803</td></tr><tr><td>CECILE ORTIZ</td><td>CEBU CITY</td><td>9229022903</td></tr><tr><td>JEZIEL ELA O. SAYCON</td><td>LABANGON, CEBU CITY</td><td>9070517473</td></tr></table>		NAME	ADDRESS	TEL. NO.	NICK FREDDY R. BELLO	VISAYAS STATE UNIVERSITY	9353256803	CECILE ORTIZ	CEBU CITY	9229022903	JEZIEL ELA O. SAYCON	LABANGON, CEBU CITY	9070517473		
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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.															
<table><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>PASSPORT</td></tr><tr><td>ID/License/Passport No.:</td><td>P6126008B</td></tr><tr><td>Date/Place of Issuance:</td><td>01/19/2021 -DFA TACLOBAN</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:	PASSPORT	ID/License/Passport No.:	P6126008B	Date/Place of Issuance:	01/19/2021 -DFA TACLOBAN	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>May 03, 2024</td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	May 03, 2024	Date Accomplished
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SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.															
<table><tr><td>_____ Person Administering Oath</td></tr></table>		_____ Person Administering Oath													
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