

# 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	PUTI		
FIRST NAME	MARY JHOEZELLE		NAME EXTENSION (JR., SR)
MIDDLE NAME	MURILLO		
3. DATE OF BIRTH (mm/dd/yyyy)	11/1/1995	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	CEBU CITY	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	SAN ANTONIO I House/Block/Lot No. Street POMPONAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province ZIP CODE 6521
7. HEIGHT (m)	1.58	18. PERMANENT ADDRESS	SAN ANTONIO I House/Block/Lot No. Street POMPONAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province ZIP CODE 6521
8. WEIGHT (kg)	52	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	O	20. MOBILE NO.	0917-783-8366
10. GSIS ID NO.	N/A	21. E-MAIL ADDRESS (if any)	murillo.jhoezelle@gmail.com
11. PAG-IBIG ID NO.	1212-5234-9043		
12. PHILHEALTH NO.	13-025271006-0		
13. SSS NO.	34-8527243-4		
14. TIN NO.	745-273-360-000		
15. AGENCY EMPLOYEE NO.	N/A		

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	PUTI		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	FAUZI	NAME EXTENSION (JR., SR)	FRITZ JAMVAYLE MURILLO	08-26-2013
MIDDLE NAME	SACAY		JAM ZENO M. PUTI	10-24-2018
OCCUPATION	DRIVING INSTRUCTOR			
EMPLOYER/BUSINESS NAME	TL MABUHAY DRIVING SCHOOL			
BUSINESS ADDRESS	BAYBAY CITY			
TELEPHONE NO.	09266631696			
24. FATHER'S SURNAME	MURILLO			
FIRST NAME	JOSE ALLAN	NAME EXTENSION (JR., SR)		
MIDDLE NAME	PAÑA			
25. MOTHER'S MAIDEN NAME	PUGOSA			
FIRST NAME	ANALISA			
MIDDLE NAME	SUBAYNO		(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	POMPONAN ELEMENTARY SCHOOL	PRIMARY EDUCATION	2001	2007	N/A	2007	WITH HONORS
SECONDARY	POMPONAN NATIONAL HIGH SCHOOL	SECONDARY EDUCATION	2007	2011	N/A	2011	WITH HONORS
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION	BSED-ENGLISH	2014	2019	N/A	2019	N/A
GRADUATE STUDIES	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION	MAED-ENGLISH	2020	N/A	16 UNITS	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	SEPTEMBER 09, 2022
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IV. CIVIL SERVICE ELIGIBILITY						
27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (If applicable)	
					NUMBER	Date of Validity
	PROFESSIONAL IDENTIFICATION CARD	75.8	SEPTEMBER, 2019	TACLOBAN CITY	18-1546277	11/1/2023
	DRIVER'S LICENSE		JANAURY 11, 2018	BAYBAY CITY	H12-15-002952	11/1/2023

(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)

<b>SIGNATURE</b>		<b>DATE</b>	SEPTEMBER 09, 2022
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**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			
	Tender Love n' Citizenship: Ways to be involved in the 2022 Elections	8/23/2021	8/23/2021	2	TECHNICAL	CATHOLIC EDUCATIONAL ASSOCIATION OF THE PHILIPPINES
	Field Study Courses Orientation for Resource Teachers	8/12/2021	8/12/2021	4	TECHNICAL	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION
	Google Workspace for Education: Fundamentals Training Program	7/26/2021	7/26/2021	8	TECHNICAL	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION
	2020 IN-SERVICE TRAINING (INSET) FOR SENIOR HIGH SCHOOL TEACHERS	10/22/2020	10/24/2020	24	TECHNICAL	PRIVATE EDUCATION ASSISTANCE COMMITTEE (PEAC)
	BASIC OPERATIONS OF MICROSOFT OFFICE 2016 (WORD, EXCEL, POWERPOINT)	6/1/2020	01/20/2020	80	TECHNICAL	LAUNCHER INTERNET CAFE AND PRINTING SERVICES
	BASIC EDUCATION MULTIPLE TEST CONSTRUCTION WORKSHOP SEMINAR	09/20/2018	09/20/2019	8	TECHNICAL	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION
	HOMEROOM GUIDANCE ORIENTATION AND SEMINAR WORKSHOP	5/6/2019	5/7/2019	8	SUPERVISION	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION
	GENDER AND DEVELOPMENT ORIENTATION	06/28/2018	06/28/2019	8	TECHNICAL	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION
	BASIC EDUCATION PROGRAM AND INTENSIVE TRAINING FOR EFFECTIVE TEACHING	11/6/2019	06/13/2019	24	TECHNICAL	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION
	ORGANIC AGRICULTURE PRODUCTION NCII	04/22/2019	05/24/2019	232	TECHNICAL	TECHNICAL EDUCATION AND SKILLS DEVELOPMENT AUTHORITY
	JOB ORIENTATION SEMINAR AND LABOR EDUCATION	03/28/2018	03/28/2019	8	TECHNICAL	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION
	ANNUAL REGIONAL TEACHING CONGRESS	9/1/2019	9/2/2019	8	TECHNICAL	VISAYAS STATE UNIVERSITY, TOLOSA CAMPUS

(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)
	COMMUNICATION SKILLS		N/A		N/A
	LESSON PLANNING				
	MODULE MAKING				
	MICROSOFT OFFICE				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	SEPTEMBER 09, 2022
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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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>HON. VENERANDA P. MARTINEZ</td> <td>BRGY. POMPONAN BAYBAY CITY</td> <td>9082594721</td> </tr> <tr> <td>MRS. ROSALINA SACAY</td> <td>BRGY. CARIDAD BAYBAY CITY</td> <td>9173262247</td> </tr> <tr> <td>MRS. IRENE B. MANGLE</td> <td>BRGY. CANDADAM BAYBAY CITY</td> <td>9151729488</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	HON. VENERANDA P. MARTINEZ	BRGY. POMPONAN BAYBAY CITY	9082594721	MRS. ROSALINA SACAY	BRGY. CARIDAD BAYBAY CITY	9173262247	MRS. IRENE B. MANGLE	BRGY. CANDADAM BAYBAY CITY	9151729488
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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>													
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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: 300px; height: 60px; margin: 10px auto; text-align: center;"> <p>Person Administering Oath</p> </div>													