

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	ITABLE		
FIRST NAME	HELEN	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	PALCO		
3. DATE OF BIRTH (mm/dd/yyyy)	02/09/2000	16. CITIZENSHIP	☒ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization Pls. indicate country:
4. PLACE OF BIRTH	BAYBAY CITY	If holder of dual citizenship, please indicate the details.	Philippines ▼
5. SEX	☐ Male ☒ Female		
6 CIVIL STATUS	☒ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	N/A PUROK 1 SITIO SAGKAAN House/Block/Lot No. Street N/A BIASONG Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.49	ZIP CODE	6521
8. WEIGHT (kg)	49		
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	N/A PUROK 1 SITIO SAGKAAN House/Block/Lot No. Street N/A BIASONG Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6521
11. PAG-IBIG ID NO.	121306413464		
12. PHILHEALTH NO.	130256065887		
13. SSS NO.	0644557524	19. TELEPHONE NO.	N/A
14. TIN NO.	614236608	20. MOBILE NO.	09289233760
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	helenitable09@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	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	ITABLE			
FIRST NAME	HERMELINO	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	CALDERON			
25. MOTHER'S MAIDEN NAME				
SURNAME	PALCO			
FIRST NAME	LUZ			
MIDDLE NAME	AGUELO		(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	HIPUSNGO ELEM. SCHOOL	PRIMARY	2006	2012	GRADUATED	2012	FIRST HONOR
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	SECONDARY	2012	2016	GRADUATED	2016	N/A
	BAYBAY CITY SENIOR HIGH SCHOOL	ACCOUNTANCY, BUSINESS AND MGMT. (ABM STRAND)	2016	2018	GRADUATED	2018	WITH HIGH HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRIBUSINESS	2018	2022	GRADUATED	2022	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	JUNE 20, 2025
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IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE

W. J. H.

DATE

JUNE 20, 2025

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED	
1. Training Program	2. Description of Program
3. Training Program	4. Description of Program
5. Training Program	6. Description of Program
7. Training Program	8. Description of Program
9. Training Program	10. Description of Program
11. Training Program	12. Description of Program
13. Training Program	14. Description of Program
15. Training Program	16. Description of Program
17. Training Program	18. Description of Program
19. Training Program	20. Description of Program
21. Training Program	22. Description of Program
23. Training Program	24. Description of Program
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97. Training Program	98. Description of Program
99. Training Program	100. Description of Program

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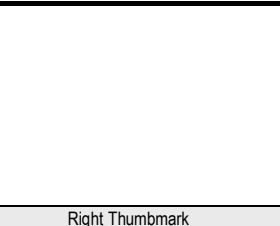
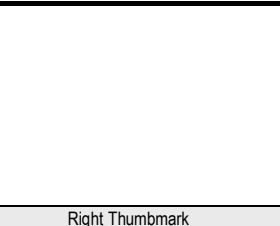
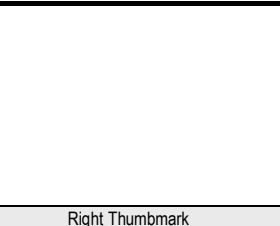
(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
CUSTOMER SERVICE SKILLS	N/A	ADVENTIST PROFESSIONAL (ADPRO)
COMMUNICATION SKILLS		
ACTIVE LISTENING		
TEAMWORK		
GOOD TIME MANAGEMENT		
ORGANIZATIONAL SKILLS		
GOOD WORK ETHIC		
PLAYING CHESS		
WATCHING K-DRAMAS & MOVIES		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	JUNE 20, 2025
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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)?	☐ 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 items: 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) <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>REYSHYL G. DURBAN</td> <td>SPRINGWOODS COUNTRYHOME, MINGLANILLA CEBU</td> <td>09954756967</td> </tr> <tr> <td>GENNIE Z. SAMBERE</td> <td>BRGY. KABALASAN, BAYBAY CITY</td> <td>09752939642</td> </tr> <tr> <td>CLEF LENNARD PIEDRAVERDE</td> <td>COTABATO ST. PAEL, SUBD. BRGY. CULIAT, QC</td> <td>09089394241</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	REYSHYL G. DURBAN	SPRINGWOODS COUNTRYHOME, MINGLANILLA CEBU	09954756967	GENNIE Z. SAMBERE	BRGY. KABALASAN, BAYBAY CITY	09752939642	CLEF LENNARD PIEDRAVERDE	COTABATO ST. PAEL, SUBD. BRGY. CULIAT, QC	09089394241
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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.													
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SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above. Person Administering Oath													