

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 () ☐ 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	SOROÑO		
FIRST NAME	RAMON RYAN		NAME EXTENSION (JR., SR.)
MIDDLE NAME	FAUSTINO		
3. DATE OF BIRTH (mm/dd/yyyy)	1/24/2001	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. CONSUEGRA, LEYTE, 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	House/Block/Lot No. Street KILIM Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.74M	ZIP CODE	6521
8. WEIGHT (kg)	70KG		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	House/Block/Lot No. Street CONSEUGRA Subdivision/Village Barangay LEYTE LEYTE City/Municipality Province
10. GSIS ID NO.	NA	ZIP CODE	6533
11. PAG-IBIG ID NO.	NA		
12. PHILHEALTH NO.	NA		
13. SSS NO.	NA	19. TELEPHONE NO.	NA
14. TIN NO.	NA	20. MOBILE NO.	09759968036
15. AGENCY EMPLOYEE NO.	NA	21. E-MAIL ADDRESS (if any)	ramon.sorono@vsu.edu.ph

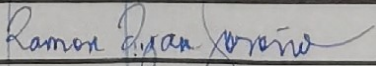
II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	NA		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR.)	NA	NA
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	SOROÑO			
FIRST NAME	RAMON	NAME EXTENSION (JR., SR.)		
MIDDLE NAME	GARGANERA			
25. MOTHER'S MAIDEN NAME	TANGILE			
SURNAME	SOROÑO			
FIRST NAME	ANALIZA			
MIDDLE NAME	FAUSTINO		(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	CONSUEGRA ELEMENTARY SCHOOL	ELEMENTARY	6/5/2007	3/31/2013	GRADUATED	2013	VALEDICTORIAN
SECONDARY	JUAN V. DELANTAR NATIONAL HIGH SCHOOL	SECONDARY	6/7/2013	3/31/2017	GRADUATED	2017	WITH HIGH HONOR
SENIOR HIGH SCHOOL	ORMOC CITY SENIOR HIGH SCHOOL	HUMANITIES AND AND SOCIAL SCIENCE	6/8/2013	5/19/2019	GRADUATED	2019	WITH HONOR
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF ARTS IN ENGLISH LANGUAGE STUDIES	8/13/2019		GRADUATING		
GRADUATE STUDIES	NA	NA					

(Continue on separate sheet if necessary)

SIGNATURE		DATE	06-9-2023
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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	Ramon Padan Arano	DATE	06-9-2023
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29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	BAYBAY WRITERS COLLECTIVE	9/14/2022	8/12/2023	NA	PRESIDENT
	AMARANTH	8/1/2019	8/1/2023	NA	WRITER

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

[illegible]

VIII. OTHER INFORMATION

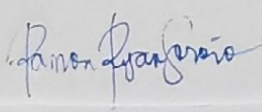

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
PHOTOGRAPHY	NA	BAYBAY WRITERS COLLECTIVE
POETRY		AMARANTH
		ABELS SOCIETY

SIGNATURE	Ramon Bryan Juarez	DATE	06-9-2023
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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 checked="" 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)		
NAME	ADDRESS	TEL. NO.
RHODORA A. BANDE	VISCA, BAYBAY CITY, LEYTE	
MARIA VANESSA E. GABUNADA	VISCA, BAYBAY CITY, LEYTE	
JETT C. QUEBEC	BURAUEN, LEYTE	
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: 4692-3703-5276-4720	 Signature (Sign inside the box) 6-9-2023 Date Accomplished	 Right Thumbmark
ID/License/Passport No.: Date/Place of Issuance: NOVEMBER 7, 2021		

SUBSCRIBED AND SWORN to before me this <u>9th of June 2023</u> , affiant exhibiting his/her validly issued government ID as indicated above.	
<div>Person Administering Oath</div>	