

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.**

I, CS ID No.

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	MORILLA		
FIRST NAME	ARIEL		NAME EXTENSION (JR., SR)
MIDDLE NAME	CAPUYAN		
3. DATE OF BIRTH (mm/dd/yyyy)	08/20/1995	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pts. indicate country:
4. PLACE OF BIRTH	TABANGO, 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	PUROK LEMONITO House/Block of No. Street Subdivision/Village Barangay ORMO CITY LEYTE City/Municipality Province ZIP CODE 6541
7. HEIGHT (m)	1.63	18. PERMANENT ADDRESS	House/Block of No. Street Subdivision/Village Barangay City/Municipality Province ZIP CODE
8. WEIGHT (kg)	63	19. TELEPHONE NO	N/A
9. BLOOD TYPE	AB+	20. MOBILE NO.	09187377075
10. GSIS ID NO.		21. E-MAIL ADDRESS (if any)	aerielmorilla@yahoo.com
11. PAG-IBIG ID NO.			
12. PHILHEALTH NO	130255454073		
13. SSS NO.			
14. TIN NO.	755-268-194		
15. AGENCY EMPLOYEE NO			

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				
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO				
24. FATHER'S SURNAME	MORILLA			
FIRST NAME	ANTONIO			
MIDDLE NAME	DALUT			
25. MOTHER'S MAIDEN NAME				
SURNAME	CAPUYAN			
FIRST NAME	ANITA			
MIDDLE NAME	DALUT			

(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	MAHLAWAN ELEMENTARY SCHOOL	PRIMARY EDUCATION	06/03/2002	04/07/2008	GRADUATE		
SECONDARY	IPL NATIONAL HIGH SCHOOL	HIGH SCHOOL	06/02/2008	04/07/2014	GRADUATE		
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	EASTERN VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY EDUCATION- MATHEMATICS	06/08/2014	04/13/2018	GRADUATE		
GRADUATE STUDIES	SAINT PAUL SCHOOL OF PROFESSIONAL STUDIES	JURIS DOCTOR	08/05/2019	01/22/2020	16 UNITS		

(Continue on separate sheet if necessary)

SIGNATURE	DATE	02-07-2023
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IV. CIVIL SERVICE ELIGIBILITY

[illegible]


(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.

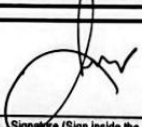

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	02-07-2023
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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> <hr/> <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: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>CATHERINE R. ABADINES</td> <td>TABANGO LEYTE</td> <td>9190093481</td> </tr> <tr> <td>MARY DOREEN M. CABALLERO</td> <td>TABANGO LEYTE</td> <td>9998891927</td> </tr> <tr> <td>MA. FLOR M. PASTOR</td> <td>TABANGO LEYTE</td> <td>9077669289</td> </tr> </tbody> </table>			NAME	ADDRESS	TEL. NO.	CATHERINE R. ABADINES	TABANGO LEYTE	9190093481	MARY DOREEN M. CABALLERO	TABANGO LEYTE	9998891927	MA. FLOR M. PASTOR	TABANGO LEYTE	9077669289	 ARNEL C. MORILLA PHOTO
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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>															

<p>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: <u>National ID</u></p> <p>ID/License/Passport No.: <u>6298-3049-7164-8359</u></p> <p>Date/Place of Issuance: <u>11-04-2021 / Tabango Leyte</u></p>	 Signature (Sign inside the box) <u>02-07-2023</u> Date Accomplished	 Right Thumbmark
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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; height: 40px; margin: 10px auto; width: 250px;"></div> <p style="text-align: center;">Person Administering Oath</p>	
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