

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	MANGUIAT		
FIRST NAME	NICOLE CHELSEA		NAME EXTENSION (JR., SR)
MIDDLE NAME	BECADA		
3. DATE OF BIRTH (mm/dd/yyyy)	8/12/2001	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	BACOR, CAVITE	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	C. ARELLANO ST. House/Block/Lot No. Street POBLACION ZONE 4 Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province 6521
7. HEIGHT (m)	1.52	ZIP CODE	
8. WEIGHT (kg)	50		
9. BLOOD TYPE	A	18. PERMANENT ADDRESS	C. ARELLANO ST. House/Block/Lot No. Street POBLACION ZONE 4 Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province 6521
10. GSIS ID NO.	N/A	ZIP CODE	
11. PAG-IBIG ID NO.	121307602253		
12. PHILHEALTH NO.	13-000128423-2		
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A
14. TIN NO.	617-955-565-00000	20. MOBILE NO.	09927080636
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	manguiatnicolechelsea@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	MANGUIAT			
FIRST NAME	JOEL	NAME EXTENSION (JR., SR)		
MIDDLE NAME	MENDEZ			
25. MOTHER'S MAIDEN NAME				
SURNAME	BECADA			
FIRST NAME	CHERLYN			
MIDDLE NAME	MAGBANUA		(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	DIPOLO ELEMENTARY SCHOOL	PRIMARY EDUCATION	2006	2012	GRADUATE	2012	Salutatorian
SECONDARY	FRANCISCAN COLLEGE OF IMMACULATE CONCEPTION	SENIOR HIGH SCHOOL	2016	2018	GRADUATE	2016	With Honors
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 BIOLOGY	2018	2022	GRADUATE	2022	Magna Cum Laude
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	February 8, 2023
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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			
	Large Marine Vertebrates Institute Philippines	October, 2022	November, 2022	20.0	Online Intern	
(Continue on separate sheet if necessary)						
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED						
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			
	Capacity Building: Laboratory Techniques for Parasite Surveillance	October, 2022	October, 2022	8.0	Technical	Department of Biological Sciences - Visayas State University
	Creating Learning Materials using PowerPoint	December, 2022	December, 2022	12.0	Technical	Department of Biological Sciences - Visayas State University
	Working with Data in Excel	November, 2022	November, 2022	12.0	Technical	Department of Biological Sciences - Visayas State University
	Techniques for Terrestrial Wildlife Surveys	November, 2022	November, 2022	12.0	Technical	Department of Biological Sciences - Visayas State University
	How to Prepare IEC Materials	November, 2022	November, 2022	12.0	Technical	Department of Biological Sciences - Visayas State University
	LAMAVE Virtual Training	October, 2022	October, 2022	20.0	Technical	Department of Biological Sciences - Visayas State University
	Theory of Change in Conservation: Insights from Philippine Primatology	October, 2022	October, 2022	12.0	Technical	Department of Biological Sciences - Visayas State University
	Mapping	October, 2022	October, 2022	12.0	Technical	Department of Biological Sciences - Visayas State University
(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)	
	N/A	N/A			N/A	
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	February 8, 2023	

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)?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>												
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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
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>SENONA A. CESAR</td><td>VISCA, BAYBAY CITY, LEYTE</td><td>9778179877</td></tr><tr><td>JULISSAH C. EVANGELIO</td><td>VISCA, BAYBAY CITY, LEYTE</td><td>053 563 7536</td></tr><tr><td>FRETZELJANE O. POGADO</td><td>VISCA, BAYBAY CITY, LEYTE</td><td>9311615757</td></tr></table>			NAME	ADDRESS	TEL. NO.	SENONA A. CESAR	VISCA, BAYBAY CITY, LEYTE	9778179877	JULISSAH C. EVANGELIO	VISCA, BAYBAY CITY, LEYTE	053 563 7536	FRETZELJANE O. POGADO	VISCA, BAYBAY CITY, LEYTE	9311615757
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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.		<div></div> <div>PHOTO</div> <div><div><div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div><div>Government Issued ID: PhilHealth</div><div>ID/License/Passport No.: 13-000128423-2</div><div>Date/Place of Issuance: October 2022</div></div><div><div></div><div>Signature (Sign inside the box)</div><div>February 8, 2023</div><div>Date Accomplished</div></div><div><div></div><div>Right Thumbmark</div></div></div>												
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.														
<div></div> <div>Person Administering Oath</div>														