

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	BATES		
FIRST NAME	ERRA MAE	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	MAHAWAN		
3. DATE OF BIRTH (mm/dd/yyyy)	12/16/1999	16. CITIZENSHIP  If holder of dual citizenship, please indicate the details.	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	MISAMIS OCCIDENTAL,OROQUIETA CITY		Philippines
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	N/A PROPER II House/Block/Lot No. Street N/A PUERTO BELLO Subdivision/Village Barangay MERIDA LEYTE City/Municipality Province 6540
7. HEIGHT (m)	1.60 m	18. PERMANENT ADDRESS	N/A PROPER II House/Block/Lot No. Street N/A PUERTO BELLO Subdivision/Village Barangay MERIDA LEYTE City/Municipality Province 6540
8. WEIGHT (kg)	60 kg		ZIP CODE
9. BLOOD TYPE	O		ZIP CODE
10. GSIS ID NO.	N/A		19. TELEPHONE NO.
11. PAG-IBIG ID NO.	N/A	20. MOBILE NO.	09674117269
12. PHILHEALTH NO.	13-202844764-0	21. E-MAIL ADDRESS (if any)	errabates@gmail.com
13. SSS NO.	N/A		
14. TIN NO.	N/A		
15. AGENCY EMPLOYEE NO.	N/A		

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	
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	BATES			
FIRST NAME	ERNESTO	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	CANONIO			
25. MOTHER'S MAIDEN NAME	REINA CAINGLES MAHAWAN			
SURNAME	BATES			
FIRST NAME	REINA			
MIDDLE NAME	MAHAWAN		(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	PUERTO BELLO ELEMENTARY SCHOOL	PRIMARY EDUCATION	2006	2012	GRADUATED	2012	WITH HONOR
SECONDARY	PUERTO BELLO NATIONAL HIGH SCHOOL	HIGH SCHOOL	2012	2018	GRADUATED	2018	WITH HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY BAYBAY CAMPUS	BACHELOR OF ELEMENTARY EDUCTION	2018	2022	GRADUATED	2022	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	06/04/2023
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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)?		<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>RONILLO O. LABANG</td><td>BRGY. PUERTO BELLO, MERIDA, LEYTE</td><td>0918-632-8903</td></tr><tr><td>JANETH A. POSAS</td><td>BRGY. PUERTO BELLO, MERIDA, LEYTE</td><td>0915-526-3733</td></tr><tr><td>JONAH CAINTIC</td><td>BRGY. STA. CRUZ, BAYBAY CITY, LEYTE</td><td>0917-301-4797</td></tr></table>		NAME	ADDRESS	TEL. NO.	RONILLO O. LABANG	BRGY. PUERTO BELLO, MERIDA, LEYTE	0918-632-8903	JANETH A. POSAS	BRGY. PUERTO BELLO, MERIDA, LEYTE	0915-526-3733	JONAH CAINTIC	BRGY. STA. CRUZ, BAYBAY CITY, LEYTE	0917-301-4797	<div>ID picture taken within the last 6 months 4.5 cm. X 3.5 cm (passport size)</div> <div>Computer generated or photocopied picture is not acceptable</div> <div>PHOTO</div>
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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>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <table><tr><td>Government Issued ID:</td><td>National ID</td></tr><tr><td>ID/License/Passport No.:</td><td>6702-6598-4972-0180</td></tr><tr><td>Date/Place of Issuance:</td><td>07/21/2022/MERIDA, LEYTE</td></tr></table>	Government Issued ID:	National ID	ID/License/Passport No.:	6702-6598-4972-0180	Date/Place of Issuance:	07/21/2022/MERIDA, LEYTE	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>04/30/2023</td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	04/30/2023	Date Accomplished	<div></div> <div>Right Thumbmark</div>		
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04/30/2023														
Date Accomplished														
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>														