

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	Sabares		
FIRST NAME	Jemiah	NAME EXTENSION (JR., SR)	
MIDDLE NAME	Bernal		
3. DATE OF BIRTH (mm/dd/yyyy)	03/29/2002	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	Ormoc City	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	House/Block/Lot No. _____ Street _____ Subdivision/Village _____ Barangay _____ City/Municipality _____ Province _____
7. HEIGHT (m)	1.54	ZIP CODE	
8. WEIGHT (kg)	56		
9. BLOOD TYPE		18. PERMANENT ADDRESS	House/Block/Lot No. _____ Street _____ Subdivision/Village _____ Tabgas _____ Subdivision/Village _____ Barangay _____ Albura _____ Leyte _____ City/Municipality _____ Province _____
10. GSIS ID NO.			
11. PAG-IBIG ID NO.		ZIP CODE	6542
12. PHILHEALTH NO.		19. TELEPHONE NO.	
13. SSS NO.		20. MOBILE NO.	09959632005
14. TIN NO.		21. E-MAIL ADDRESS (if any)	jemiahsabares303@gmail.com
15. AGENCY EMPLOYEE NO.			

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NAME EXTENSION (JR., SR)		
MIDDLE NAME			
OCCUPATION			
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME	Orge		
FIRST NAME	Demencio	NAME EXTENSION (JR., SR)	
MIDDLE NAME	Andriano		
25. MOTHER'S MAIDEN NAME			
SURNAME	Orge		
FIRST NAME	Lorena		
MIDDLE NAME	Sabares		

(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	Tabgas Elementary School					2014	with honor
SECONDARY	Dr.Geronimo B.Zaldivar Memorial School of Fisheries					2018	
VOCATIONAL / TRADE COURSE	Dr.Geronimo B.Zaldivar Memorial School of Fisheries	Technical-Vocational-Livelihood (TVL)				2020	with honor
COLLEGE	Visayas State University	Bachelor of Science in Agribusiness				2024	Cum Laude
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	10/16/2024
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