

# 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	ACAMPADO		
FIRST NAME	DULCE AMOR	NAME EXTENSION (JR., SR)	
MIDDLE NAME	CABAHUG		
3. DATE OF BIRTH (mm/dd/yyyy)	01/12/1994	16. CITIZENSHIP	<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	SULAT EASTERN SAMAR	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:		
7. HEIGHT (m)	1.676	17. RESIDENTIAL ADDRESS	N/A    N/A House/Block/Lot No.    Street N/A    RIVERSIDE Subdivision/Village    Barangay SULAT    EASTERN SAMAR City/Municipality    Province ZIP CODE    6815
8. WEIGHT (kg)	60	18. PERMANENT ADDRESS	N/A    NATIONAL ROAD House/Block/Lot No.    Street N/A    RIVERSIDE Subdivision/Village    Barangay SULAT    EASTERN SAMAR City/Municipality    Province ZIP CODE    6815
9. BLOOD TYPE	AB+	19. TELEPHONE NO.	N/A
10. GSIS ID NO.	N/A	20. MOBILE NO.	09940868795
11. PAG-IBIG ID NO.	1211-4410-4535	21. E-MAIL ADDRESS (if any)	<a href="mailto:dulceamorca.13@gmail.com">dulceamorca.13@gmail.com</a>
12. PHILHEALTH NO.	08-025954941-1		
13. SSS NO.	34-2894137-9		
14. TIN NO.	467-498-948-000		
15. AGENCY EMPLOYEE NO.	N/A		

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	ALBERO		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ANDRO	NAME EXTENSION (JR., SR)	JADE FERLEE ALBERO	16/04/2013
MIDDLE NAME			CLYDE ANDRE ALBERO	14/09/2020
OCCUPATION	COURIER			
EMPLOYER/BUSINESS NAME	FLASH EXPRESS			
BUSINESS ADDRESS	BAYBAY CITY BRANCH			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	ACAMPADO			
FIRST NAME	ALEXANDER	NAME EXTENSION (JR., SR)		
MIDDLE NAME	DELA CUEVA			
25. MOTHER'S MAIDEN NAME				
SURNAME	CABAHUG			
FIRST NAME	ROSARIO			
MIDDLE NAME	BIAGCONG		(Continue on separate sheet if necessary)	

## III. EDUCATIONAL BACKGROUND

26. LEVEL SIC	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	SULAT CENTRAL ELEMENTARY SCHOOL	PRIMARY EDUCATION	09/06/2000	31/03/2006	GRADUATE	2006	WITH HONORS
SECONDARY	SULAT NATIONAL HIGHSCHOOL	SECONDARY/HIGHSCHOOL	10/06/2006	30/03/2010	GRADUATE	2010	WITH HONORS
VOCATIONAL / TRADE COURSE	TESDA - SAMAR NATIONAL SCHOOL OF ARTS AND TRADES	NATIONAL CERTIFICATE IN COOKERY	10/06/2014	15/12/2014	GRADUATE	2014	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRICULTURE	15/08/2016	30/09/2020	GRADUATE	2020	N/A
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF SCIENCE IN PLANT PATHOLOGY	15/03/2021	PRESENT	GRADUATE	ON-GOING	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	03/30/2025
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[illegible]

**V. WORK EXPERIENCE**  
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

SIGNATURE		DATE	03/30/2025
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[illegible]










#### 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)	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
COOKING	N/A	PLANT PROTECTION MAJORS ASSOCIATION
DRIVING		
OPERATING A MICROSCOPE		
INTERNET SURFING		
MICROSOFT APPLICATIONS		
TRAVELLING		

SIGNATURE		DATE	03/30/2025
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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> <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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: center;">FINISHED CONTRACT</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 style="text-align: center;">##</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>ELVIRA L. OCLARIT</td> <td>GUADALUPE, BAYBAY CITY LEYTE</td> <td>9199495234</td> </tr> <tr> <td>ROBELYN T. PIAMONTE</td> <td>COGON, BAYBAY LEYTE</td> <td>9171546999</td> </tr> <tr> <td>MA. PERLITA LACANDAZO</td> <td>TACLOBAN CITY, LEYTE</td> <td>9237204613</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	ELVIRA L. OCLARIT	GUADALUPE, BAYBAY CITY LEYTE	9199495234	ROBELYN T. PIAMONTE	COGON, BAYBAY LEYTE	9171546999	MA. PERLITA LACANDAZO	TACLOBAN CITY, LEYTE	9237204613
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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>													
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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; width: 200px; height: 50px; margin: 10px auto;"></div> <div style="border: 1px solid black; width: 200px; height: 20px; margin: 10px auto; text-align: center;">       Person Administering Oath     </div>													