

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 () 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	ALIASOT		
FIRST NAME	BABY JANE		NAME EXTENSION (JR., SR)
MIDDLE NAME	LUCENOS		
3. DATE OF BIRTH (mm/dd/yyyy)	12/07/2000	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 SAN JUAN Subdivision/Village Barangay ORMOC CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.49	ZIP CODE	6541
8. WEIGHT (kg)	56	18. PERMANENT ADDRESS	House/Block/Lot No. Street SAN JUAN Subdivision/Village Barangay ORMOC CITY LEYTE City/Municipality Province
9. BLOOD TYPE	B+	ZIP CODE	6541
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	121328856551	20. MOBILE NO.	09202726642
12. PHILHEALTH NO.	13-252795697-1	21. E-MAIL ADDRESS (if any)	babyjanealiasot07@gmail.com
13. SSS NO.	N/A		
14. TIN NO.	634-724-375-00000		
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)	NA	NA
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	NA			
24. FATHER'S SURNAME	ALIASOT			
FIRST NAME	EDWIN	SR		
MIDDLE NAME	TUMANDA			
25. MOTHER'S MAIDEN NAME				
SURNAME	LUCENOS			
FIRST NAME	MARILYN			
MIDDLE NAME	ANGCAJAS			

(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	SAN JUAN ELEMENTARY SCHOOL	ELEMENTARY EDUCATION	29/06/2007	04/09/2015		2013	ACADEMIC ACHIEVER
SECONDARY	MARGEN NATIONAL HIGH SCHOOL	HIGH SCHOOL EDUCATION	06/06/2013	04/19/2019		2019	WITH HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A		N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY EDUCATION- SOCIAL STUDIES	08/05/2019	08/04/2023		2023	CUM LAUDE
GRADUATE STUDIES	N/A	N/A					

(Continue on separate sheet if necessary)

SIGNATURE		DATE	July 2, 2024
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IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]


(Continue on separate sheet if necessary)

SIGNATURE		DATE	07/02/2024
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[illegible]



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			
	N/A	N/A	N/A	N/A	N/A	
(Continue on separate sheet if necessary)						
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED						
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)						
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			
	ANALYZING DATA AND WRITING THE RESULTS AND DISCUSSION,	05/18/23	05/18/23	8.0	N/A	COLLEGE OF EDUCATION
	REGIONAL PRE-SERVICE CONGRESS 2023	04/22/23	04/22/23	8.0	N/A	PAFTE, Region VIII
	PRE-DEVELOPMENT ORIENTATION PROGRAM FOR PRACTICE TEACHERS	02/22/23	02/24/23	8.0	N/A	COLLEGE OF EDUCATION
	RIZAL: HIS HUMANITY, EXTRAORDINARINESS. & GODLIKE VISION	03/03/2024	03/03/2024	5.0	N/A	ICON REVIEW & TRAINING CENTER MANAGEMENT
(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)	
	COMPUTER LITERATE	N/A			N/A	
	WRITING	N/A			N/A	
	TEACHING	N/A			N/A	

(Continue on separate sheet if necessary)		
SIGNATURE		DATE
		07/02/2024

<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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details:</p> <hr/>												
<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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details:</p> <hr/> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details:</p> <p style="margin-left: 40px;">Date Filed: _____</p> <p style="margin-left: 40px;">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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details:</p> <hr/>												
<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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details:</p> <hr/>												
<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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details: _____</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details: _____</p>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input type="checkbox"/> NO </div> <p>If YES, give details (country):</p> <hr/>												
<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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, please specify: _____</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, please specify ID No: _____</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <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 style="text-align: center;">MILDRED M. SIAREZ</td> <td style="text-align: center;">VISCA, BAYBAY CITY LEYTE</td> <td style="text-align: center;">9234576168</td> </tr> <tr> <td style="text-align: center;">JAY C. BANSALE</td> <td style="text-align: center;">VISCA, BAYBAY CITY LEYTE</td> <td style="text-align: center;">9489762630</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	MILDRED M. SIAREZ	VISCA, BAYBAY CITY LEYTE	9234576168	JAY C. BANSALE	VISCA, BAYBAY CITY LEYTE	9489762630			
NAME	ADDRESS	TEL. NO.											
MILDRED M. SIAREZ	VISCA, BAYBAY CITY LEYTE	9234576168											
JAY C. BANSALE	VISCA, BAYBAY CITY LEYTE	9489762630											
<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>													

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance
Government Issued ID: NATIONAL ID

PHOTO

ID/License/Passport No.: 3910-7852-6817-3189
Date/Place of Issuance: 09/02/2021

Signature (Sign inside the box)
07/02/2024
Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath