

## 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	SIA		
FIRST NAME	NIKKI		
MIDDLE NAME	TABUCANON		
NAME EXTENSION (JR., SR)			
3. DATE OF BIRTH (mm/dd/yyyy)	10/2/91	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	ORMOC CITY	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		Pls. indicate country:
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	257 House/Block/Lot No. SSS VILLAGE Subdivision/Village ORMOC CITY City/Municipality
7. HEIGHT (m)	1.57 m	18. PERMANENT ADDRESS	257 House/Block/Lot No. SSS VILLAGE Subdivision/Village ORMOC CITY City/Municipality
8. WEIGHT (kg)	52 kg	19. TELEPHONE NO.	053 5612321
9. BLOOD TYPE	O+	20. MOBILE NO.	09059991479
10. GSIS ID NO.	CRN-021-1628-7780-8	21. E-MAIL ADDRESS (if any)	nikkitabucanonsia@gmail.com
11. PAG-IBIG ID NO.	121177904052		
12. PHILHEALTH NO.	13-025164666-0		
13. SSS NO.	0635008202		
14. TIN NO.	462519868000		
15. AGENCY EMPLOYEE NO.			

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		
FIRST NAME	NAME EXTENSION (JR., SR)		
MIDDLE NAME			
OCCUPATION	N/A		
EMPLOYER/BUSINESS NAME	N/A		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	N/A		
23. NAME of CHILDREN (Write full name and list all)	AXL ANTHONY S. ZALDIVAR		
DATE OF BIRTH (mm/dd/yyyy)	8/12/14		
24. FATHER'S SURNAME	SIA		
FIRST NAME	WILSON		
MIDDLE NAME	MARTINEZ		
25. MOTHER'S MAIDEN NAME	TABUCANON		
SURNAME	IRA		
FIRST NAME	PIANO		
MIDDLE NAME			

(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	ORMOC SE SAN SCHOOL	ELEMENTARY EDUCATION	1998	2004		2004	CLASS VALEDICTORIAN
SECONDARY	ST. PETER'S COLLEGE OF ORMOC	SECONDARY EDUCATION	2004	2008		2008	WITH HIGHEST HONORS
VOCATIONAL / TRADE COURSE							
COLLEGE	VELEZ COLLEGE	BACHELOR'S DEGREE IN NURSING	2008	2012		2012	
GRADUATE STUDIES	WESTERN LEYTE COLLEGE	JURIS DOCTOR	2015	2020		2020	

(Continue on separate sheet if necessary)

SIGNATURE

DATE

OCTOBER 27, 2023



[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	OCTOBER 27, 2023
-----------	---	------	------------------



[illegible]


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)

[illegible]

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	COMMUNICATIONS SKILLS (LISTENING, VERBAL, WRITTEN)		N/A		OCCIDENTAL LEYTE BAR ASSOCIATION
	COMPUTER LITERATE				INTEGRATED BAR OF THE PHILIPPINES- LEYTE
	DRIVING				
	READING BOOKS				

SIGNATURE		DATE	OCTOBER 27, 2023
-----------	---	------	------------------

OCTOBER 27, 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)?

☐ YES☒ NO

☐ YES☒ NO

If YES, give details:

35. a. Have you ever been found guilty of any administrative offense?

b. Have you been criminally charged before any court?

☐ YES☒ NO

If YES, give details:

☐ YES☒ NO

If YES, give details:

Date Filed:

Status of Case/s:

36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?

☐ YES☒ NO

If YES, give details:

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?

☒ YES☐ NO

If YES, give details:

resignation December 2019; finished contract 2020

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?

☐ YES☒ NO

If YES, give details:

☐ YES☒ NO

If YES, give details:

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES☒ NO

If YES, give details (country):

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?

☐ YES☒ NO

If YES, please specify:

☐ YES☒ NO

If YES, please specify ID No:

☒ YES☐ NO

If YES, please specify ID No:

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
PCOL NELVIN M RICOHERMOSO	CITY DIRECTOR, OCPO HEADQUARTERS, BRGY. CAMP DOWNES, ORMOC CITY	N/A
ATTY. BENJAMIN S. PONGOS, JR.	CITY PROSECUTOR'S OFFICE, HALL OF JUSTICE, ORMOC CITY	9173072685
MR. VINCENT L. EMNAS	CITY ADMINISTRATOR, NEW ORMOC CITY HALL, AUNUBING ST., COGON, ORMOC CITY	9173063353

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.



NIKKI T. SIA

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)

PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: Driver's License

ID/License/Passport No.: H03-15-000309

Date/Place of Issuance: 09/21/23 LTO Ormoc City

Signature (Sign inside the box)

OCTOBER 27, 2023

Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this OCT 27 2023

Doc. No.: 231

Page No.: 017

Book No.: II

Series of: 2023

ATTY. JOHN RAPHAEL S. CARACUEL

Ormoc City, Kansara, Matag ob, Florida, and Isabel, Leyte

Notarial Commission No. ARM-22-09-017-NC

Valid until December 31, 2024

Person Administering Oath

IBP RECEIPT NO. 262776, IBP Leyte 03 January 2023

MCLE Compliance No. Exempt. Bar Passer 20 21

Unit 8F-05, 2nd Floor Galsano Capital Ormoc Central Mall, Aviles St., District 12, Ormoc City, Leyte

affiant exhibiting his/her validly issued government ID as indicated above.

CS FORM 212 (Revised 2017), Page 4 of 4