

PERSONAL DATA SHEET

WARNING: Any misinterpretation 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	DONAYRE		
FIRST NAME	GARY	NAME EXTENSION (JR., SR.)	N/A
MIDDLE NAME	BULAHAN		
3. DATE OF BIRTH (mm/dd/yyyy)	16/10/1999	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	ORMOC CITY	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	N/A PUROK LEMONITO House/Block/Lot No. Street N/A SAN VICENTE Subdivision/Village Barangay ORMOC CITY LEYTE City/Municipality Province 6541
7. HEIGHT (m)	1.55	18. PERMANENT ADDRESS	N/A PUROK LEMONITO House/Block/Lot No. Street N/A SAN VICENTE Subdivision/Village Barangay ORMOC CITY LEYTE City/Municipality Province 6541
8. WEIGHT (kg)	45KG	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	'O'	20. MOBILE NO.	09465307017
10. GSIS ID NO.	N/A	21. E-MAIL ADDRESS (if any)	itsgarydonayre@gmail.com
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	13-252182646-4		
13. SSS NO.	06-4462593-5		
14. TIN NO.	N/A		
15. AGENCY EMPLOYEE NO.	N/A		

II. FAMILY BACKGROUND

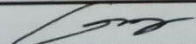
22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR.)	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	DONAYRE			
FIRST NAME	GREGORIO	NAME EXTENSION (JR., SR.)		
MIDDLE NAME	GORON			
25. MOTHER'S MAIDEN NAME				
SURNAME	BULAHAN			
FIRST NAME	GLORIA			
MIDDLE NAME	MARSON			

(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 CITY CENTRAL SCHOOL	GRADUATE	2008	2012	GRADUATED	2012	NONE
SECONDARY	ORMOC CITY REGIONAL SPORTS ACADEMY	SPORTS TRACK	2016	2018	GRADUATED	2018	WITH HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	EASTERN VISAYAS STATE UNIVERSITY - ORMOG CITY CAMPUS	BACHELOR OF PHYSICAL EDUCATION	2018	2022	GRADUATED	2022	CUM LAUDE
SUPPLEMENTAL COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

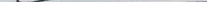
(Continue on separate sheet if necessary)

SIGNATURE		DATE	September 8, 2022
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27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	N/A	N/A	N/A	N/A	N/A	N/A
NOTHING FOLLOWS						

V. WORK EXPERIENCE

[illegible][illegible]

SIGNATURE		DATE	SEPTEMBER 08, 2022
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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		
	ALUGYAW DANCE COMPANY	24/08/2018	PRESENT	N/A	FORMER ASSISTANT
	ORMOC SAYAW KOMUNIDAD	02/01/2019	PRESENT	N/A	LIAISON OFFICER
	NOTHING FOLLOWS				

(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			
	ORMOC CITY TRAINING AWORKSHOP AND DANCE EXCHANGE OF THE ORMOC CITY LOCALIZED FOLK DANCES	05/23/2022	05/23/2022	56	PARTICIPANT	SCHOOLS DIVISION OFFICE OF ORMOC CITY
	BASIC RESERVE OFFICERS TRAINING CORPS (ROTC) COMPONENT OF THE NATIONAL SERVICE TRAINING PROGRAM	2018	2019		STUDENT	EASTERN VISAYAS STATE UNIVERSITY - ORMOC CAMPUS
	BASIC RESERVE OFFICERS TRAINING CORPS (ROTC) COMPONENT OF THE NATIONAL SERVICE TRAINING PROGRAM	2018	2019		STUDENT	EASTERN VISAYAS STATE UNIVERSITY - ORMOC CAMPUS
	ANTI-SEXUAL HARASSMENT ACT WEBINAR	03/31/2022	03/31/2022	5	PARTICIPANT	EASTERN VISAYAS STATE UNIVERSITY - ORMOC CAMPUS
	JOB CAREER PREPARATION WEBINAR	28/03/2022	28/03/2022	5	PARTICIPANT	EASTERN VISAYAS STATE UNIVERSITY - ORMOC CAMPUS
	SAFE SPACES ACT&ANTI-SEXUAL HARASSMENT LAW WEBINAR	05/05/2022	05/05/2022	5	PARTICIPANT	EASTERN VISAYAS STATE UNIVERSITY - ORMOC CAMPUS
	ANNUAL STUDENT TEACHERS' CONVENTION	26/03/2022	26/03/2022	5	PARTICIPANT	EASTERN VISAYAS STATE UNIVERSITY - ORMOC CAMPUS
	PRE-DEPLOYMENT SEMINAR FOR PRE-SERVICE TEACHER	31/03/2022	31/03/2022	5	PARTICIPANT	EASTERN VISAYAS STATE UNIVERSITY - ORMOC CAMPUS
	PRE-DEPLOYMENT SEMINAR FOR PRE-SERVICE TEACHER	31/03/2022	31/03/2022	5	PARTICIPANT	EASTERN VISAYAS STATE UNIVERSITY
	DISASTER PREPAREDNESS SEMINAR	07/03/2022	27/03/2022	5	PARTICIPANT	NDRRMC
	NOTHING FOLLOWS					

(Continue on separate sheet if necessary)


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31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	
	CHOREOGRAPHER		N/A		N/A
	DANCING		CULTURE AND THE ARTS AWARDEE		ALUGYAW DANCE COMPANY
	OFFICIATING BADMINTON		N/A		N/A
	PLAYING BADMINTON		N/A		N/A
	LEADERSHIP AND TIME MANAGEMENT		N/A		N/A
	EASILY ADAPT WITH DIVERSE PEOPLE		N/A		N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	SEPTEMBER 08, 2022
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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)?

☐ 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: _____

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)

	ADDRESS	TEL. NO.
ROXY C. BANDEJO	ORMOC CITY	9989824823
SASHI DARREL SEGUIDO	ORMOC CITY	9925967793
ARIEL MORILLA	TABANGO LEYTE	9187377075

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.

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

Government Issued ID: _____
ID/License/Passport No.: _____
Date/Place of Issuance: _____

Signature (Sign inside the box)
SEPTEMBER 08, 2022
Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this 3rd day of January 2022, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath



DONAYRE, GARY B.