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 SHE	EET (PDS) BEFORE ACCOM	IPLISHING TH	E PDS FOR					
	and use separate sheet if necessary. Indicate N	//A if not applicable. DO NOT A	BBREVIATE.		1. CS ID No.		(Do not fill up. I	For CSC use only)	
I. PERSONAL INFORMATION									
2. SURNAME	ILAGAN					LUME SYTEMORY (ID	08)		
FIRST NAME	MARY JOY				NAME EXTENSION (JR	., SK)			
MIDDLE NAME	CECEBAN								
DATE OF BIRTH (mm/dd/yyyy)	11/24/1996	16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenshi ☐ by birth				p by naturalization		
4. PLACE OF BIRTH	ORMOC CITY	If holder of dual citizer	nship,			Pls. indicate of			
E OFV	☐ Male ☑ Female	please indicate the de	etails.			▼			
5. SEX	_	47 DECIDENTIAL ADDRESS	Π			SITIO UPPER			
6 CIVIL STATUS	✓ Single Married ✓ Widowed Separated	17. RESIDENTIAL ADDRESS	17. RESIDENTIAL ADDRESS House		se/Block/Lot No.			Street	
	Other/s:		Sut	odivision/Village	Α	NL	JEVA SOCIEDAD Barangay)	
7. HEIGHT (m)	1.5 M	Suc		ORMOC			LEYTE		
8. WEIGHT (kg)	52 KGS.			ity/Municipality 6541			Province		
		18. PERMANENT ADDRESS	ZIP CODE						
9. BLOOD TYPE	N/A	10.1 ENWARENT ADDITECT	Hou	House/Block/Lot No.			SITIO UPPER Street		
10. GSIS ID NO.	N/A		Sub	odivision/Village	9	NU	NUEVA SOCIEDAD Barangay		
11. PAG-IBIG ID NO.	1211 5195 6567			ORMOC City/Municipality			LEYTE Province		
12. PHILHEALTH NO.	13-050172734-3	ZIP CODE		6541					
13. SSS NO.	06-3687063-3	19. TELEPHONE NO.			N/A				
14. TIN NO.	345-973-001	20. MOBILE NO.			09				
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)		<u>ji</u>	oyilagan1	<u>om</u>			
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	N/A		23. NAME of CHI	LDREN (Write		list all) DATE OF BIRTH (mm/dd/yyyy)			
FIRST NAME	N/A	NAME EXTENSION (JR., SR)			N/A		N	N/A	
MIDDLE NAME	N/A		N/A			N/A			
OCCUPATION	N/A		N/A			N/A		N/A	
EMPLOYER/BUSINESS NAME	N/A		N/A			N/A		N/A	
BUSINESS ADDRESS	N/A		N/A			N/A		N/A	
TELEPHONE NO.	N/A		NA			N/A			
24. FATHER'S SURNAME	ILAGAN						06/25/1973		
FIRST NAME	PABLITO	JR							
MIDDLE NAME	BATULAN								
25. MOTHER'S MAIDEN NAME	-								
SURNAME					06/3	0/1075			
FIRST NAME	MARIA JOSEVEI	D	06/20/1975						
		-		(Continue on separate sheet if necessary)					
MIDDLE NAME III. EDUCATIONAL BACKGE	UBAS			(00	onunue on sej	parate sheet ii neces	sary)		
	COOND				_			SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)		PERIOD OF A	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	INAAD ELEMENTARY SCHOOL	Grade 1 to Grade 6		25/06/2003	13/09/2009	N/A	2009	VALEDICTO RIAN	
SECONDARY	LILO-AN NATIONAL HIGH SCHOOL	1st year to 4th year		06/16/2010	31/03/2013	N/A	2013	N/A	
VOCATIONAL / TRADE COURSE	N/A			N/A	N/A	N/A	N/A	N/A	
COLLEGE	VISAYAS STATE UNIVERSITY BACHELOR OF SECTION MAJOR IN			1/08/2018	12/08/2022	N/A	2022	CUM LAUDE	
GRADUATE STUDIES	N/A N/A		· -			N/A	N/A	N/A	
	<u> </u>	Continue on separate sheet if nece	essary)						
SIGNATURE	SIGNATURE D,				\TE		August 20, 2023		
						CS	FORM 212 (Revise	ed 2017), Page 1 of 4	

V. WORK EXPERIE (Include private empl 28. INCLUSIVE DAT (mm/dd/yyyy)	ICE ELIGII	BILITY							
V. WORK EXPERIE (Include private empl 28. INCLUSIVE DAT (mm/dd/yyyy) From To 4/17/2015 28/07/20	27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable)			DATE OF EXAMINATION / CONFERMENT	TION / CONFER	RMENT	LICENSE (if a	pplicable) Date of Validity	
V. WORK EXPERIE (Include private empl 28. INCLUSIVE DAT (mm/dd/yyyy) From To 4/17/2015 28/07/20	LICENSED PROFESSIONAL TEACHER 86.8			19/03/2023	TACLOBAN CITY			2074567	11/24/2026
(Include private employed) 28. INCLUSIVE DAT (mm/dd/yyyy) From To 4/17/2015 28/07/20			00.0					2014001	11/21/2020
(Include private employed) 28. INCLUSIVE DAT (mm/dd/yyyy) From To 4/17/2015 28/07/20									
(Include private employed) 28. INCLUSIVE DAT (mm/dd/yyyy) From To 4/17/2015 28/07/20									
(Include private employed) 28. INCLUSIVE DAT (mm/dd/yyyy) From To 4/17/2015 28/07/20									
(Include private employed) 28. INCLUSIVE DAT (mm/dd/yyyy) From To 4/17/2015 28/07/20									
(Include private employed) 28. INCLUSIVE DAT (mm/dd/yyyy) From To 4/17/2015 28/07/20									
(Include private employed) 28. INCLUSIVE DAT (mm/dd/yyyy) From To 4/17/2015 28/07/20									
(Include private employed) 28. INCLUSIVE DAT (mm/dd/yyyy) From To 4/17/2015 28/07/20	EDIENOE		(Cor	ntinue on separate sheet	if necessary)				
(mm/dd/yyyy) From Tc 4/17/2015 28/07/20		nt. Start from your recent	t work) Description	of duties should be	indicated in the attached	d Work Expe	rience sheet.		
4/17/2015 28/07/20		POSITION T		DEPARTMENT / AGENCY / OFFICE / COMPANY		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/ N)
	То	(Write in full/Do not	abbreviate)	(Write in full					
2/18/2014 4/12/201	07/2018	STOCK CHE	CKER	TOP C	ONE 888 INC.	P3,000.00		CONTRACTUA L	N
	2/2015	CASHIE	R	TOP C	ONE 888 INC.	P3,000.00		CONTRACTUA L	N
			(Cor	ntinue on separate sheet	if necessarv)				
SIGNATURE	IRE	Sama	, 50.	,	DATE		August 20, 202	3	

VI. VOLUNTARY WORK OR INVOLVEMENT II	N CIVIC / NON-GOVERNMENT /	PEOPLE / VO	LUNTARY OF	RGANIZATION/	S	
29. NAME & ADDRESS OF OF (Write in full)			VE DATES dd/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK
BARANGAY NUEVA SOCIEDAD FARMER'S ASSOCIATION			PRESENT		SECRETARY	
KABATAAN KONTRA-DROGA AT TERORISMO (BARANGAY CLUSTER)			PRESENT		TREASURER	
VII. LEARNING AND DEVELOPMENT (L&D) I.		ntinue on separate		()		
30. TITLE OF LEARNING AND DEVELOPMENT INTE	RVENTIONS/TRAINING PROGRAMS	INCLUSIVE DATES OF		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)
(William)		From	То		Technical/etc)	(Trice in fair)
N/A						
VIII. OTHER INFORMATION	(Con	tinue on separate	sneet if necessary	<u>//</u>		
31. SPECIAL SKILLS and HOBBIES	32. NON	-ACADEMIC DISTII	NCTIONS / RECO	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
READING		PHILIPPINE ASSOCIATION FOR TEACHERS				
WRITING ESSAYS AND POEMS	N/A and E BARANGA					and EDUCATORS (PAFTE), INC. BARANGAY NUEVA SOCIEDAD FARMER'S ASSOCIATION
	(Con	tinue on separate	sheet if necessary	()		
SIGNATURE	Canal				ATE	August 20, 2023

34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree?	☐ YES [☑ NO					
	b. within the fourth degree (for Local Government Unit - Care	YES [☑ NO :					
35.	a. Have you ever been found guilty of any administrative offe	☐ YES ☑ NO If YES, give details:						
	b. Have you been criminally charged before any court?	☐ YES ☑ NO If YES, give details: Date Filed: Status of Case/s:						
36.	Have you ever been convicted of any crime or violation of an any court or tribunal?	☐ YES ☑ NO If YES, give details:						
37.	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fir in the public or private sector?		✓ YES ☐ NO If YES, give details: RESIGNATION					
38.	A. Have you ever been a candidate in a national or local electron Barangay election)?	☐ YES ☑ NO If YES, give details:						
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local of	☐ YES ☑ NO If YES, give details:						
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):						
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),							
a.	Are you a member of any indigenous group?	☐ YES ☑ NO If YES, please specify:						
b.	Are you a person with disability?	☐ YES ☑ NO If YES, please specify ID No:						
C.	Are you a solo parent?	☐ YES ☑ NO If YES, please specify ID No:						
41.	REFERENCES (Person not related by consanguinity or affinity to applican	nt /appointee)						
	NAME	ADDRESS	TEL. NO.					
	ELVINA C. OMAMBAC	BRGY. NUEVA SOCIEDAD, ORMOC CITY	9759073278	a a				
	LUVIMINDA S. BANDIOLA	BUNGA, BAYBAY CITY, LEYTE	9068102137					
40	CONCORDIO S. LIBORES	BRGY. NUEVA SOCIEDAD, ORMOC CITY	9567833337					
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. agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.								
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance							
	overnment Issued ID: PRC ID	3,27						
ID	//License/Passport No.: 2074567	ox)						
Da	ate/Place of Issuance: 07/21/2023 - PRC ORMOC	Right Thumbmark						
	SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.							
	Γ							
		h						
	_	Person Administering Oatl						