

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	MANAPSAL		
FIRST NAME	SHAYLENE		NAME EXTENSION (JR., SR)
MIDDLE NAME	BALLICUD N/A		
3. DATE OF BIRTH (mm/dd/yyyy)	22/06/2000	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	CATARMAN, NORTHERN SAMAR	If holder of dual citizenship, please indicate the details.	Philippines ▼
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 LINA O Subdivision/Village Barangay INOPACAN LEYTE City/Municipality Province
7. HEIGHT (m)	1.64 m.	ZIP CODE	6522
8. WEIGHT (kg)	60 kg.		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	House/Block/Lot No. Street LINA O Subdivision/Village Barangay INOPACAN LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6522
11. PAG-IBIG ID NO.	121339223261		
12. PHILHEALTH NO.	N/A	19. TELEPHONE NO.	N/A
13. SSS NO.	06-4793142-2	20. MOBILE NO.	09855875451
14. TIN NO.	654-314-384-00000	21. E-MAIL ADDRESS (if any)	shaylene0622@gmail.com
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		NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	MANAPSAL			
FIRST NAME	CIELITO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	BISNAR			
25. MOTHER'S MAIDEN NAME				
SURNAME	BALLICUD			
FIRST NAME	JOSEFINA			
MIDDLE NAME	EVA		(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	INOPACAN CENTRAL SCHOOL	ELEMENTARY LEVEL	06/01/2008	03/31/2013	Graduated	2013	8TH HONORS
SECONDARY	VSU INTEGRATED HIGH SCHOOL	SENIOR HIGH SCHOOL LEVEL	08/15/2017	05/31/2019	Graduated	2019	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	COLLEGE LEVEL	09/01/2019	08/03/2023	Graduated	2023	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	October 19, 2024
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IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

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

[illegible]

(Continue on separate sheet if necessary)

<i>SIGNATURE</i>		<i>DATE</i>	October 19, 2024
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[illegible]

(Continue on separate sheet if necessary)

[illegible]

(Continue on separate sheet if necessary)

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
INTERPERSONAL SKILLS	N/A	PHILIPPINE ASSOCIATION FOR TEACHERS AND EDUCATORS (PAFTE) INC.
TECHNICAL SKILLS	N/A	
TEAMWORK SKILLS	N/A	
MULTITASKING SKILLS	N/A	

(Continue on separate sheet if necessary)

<i>SIGNATURE</i>		<i>DATE</i>	<i>October 19, 2024</i>
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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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</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><input type="checkbox"/> YES <input 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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>DR. ROSARIO P. ABELA</td> <td>VISAYAS STATE UNIVERSITY</td> <td>9183641159</td> </tr> <tr> <td>DR. BAYRON S. BARREDO</td> <td>VISAYAS STATE UNIVERSITY</td> <td>9515112133</td> </tr> <tr> <td>JANE FRANCES CANEGA</td> <td>CEBU CITY</td> <td>9380226891</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	DR. ROSARIO P. ABELA	VISAYAS STATE UNIVERSITY	9183641159	DR. BAYRON S. BARREDO	VISAYAS STATE UNIVERSITY	9515112133	JANE FRANCES CANEGA	CEBU CITY	9380226891
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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>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td style="padding: 2px;">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td style="padding: 2px;">Government Issued ID: 5072-6976-2756-0325</td> </tr> <tr> <td style="padding: 2px;">ID/License/Passport No.: 2200006</td> </tr> <tr> <td style="padding: 2px;">Date/Place of Issuance: Inopacan Leyte</td> </tr> </table>	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)	PLEASE INDICATE ID Number and Date of Issuance	Government Issued ID: 5072-6976-2756-0325	ID/License/Passport No.: 2200006	Date/Place of Issuance: Inopacan Leyte	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 100px; vertical-align: bottom; padding: 2px;">Signature (Sign inside the box)</td> </tr> <tr> <td style="padding: 2px;">Date Accomplished</td> </tr> </table>	Signature (Sign inside the box)	Date Accomplished					
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<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 150px; height: 100px; margin-left: 10px; position: relative;"> <div style="position: absolute; bottom: 5px; right: 5px; background: white; padding: 2px;">Right Thumbmark</div> </div> </div>													
<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: 250px; height: 60px; margin: 10px auto; position: relative;"> <div style="position: absolute; bottom: 5px; right: 5px; background: white; padding: 2px;">Person Administering Oath</div> </div>													