

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** **1.** CS ID No (Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	GALISIM		
FIRST NAME	EUNICE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	SAMAS		
3. DATE OF BIRTH (mm/dd/yyyy)	10/20/1997	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	ABUYOG, LEYTE	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	REAL 1 House/Block/Lot No. Street BALOCAWEHAY Subdivision/Village Barangay ABUYOG LEYTE City/Municipality Province 6510
7. HEIGHT (m)	1.49	ZIP CODE	
8. WEIGHT (kg)	45		
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	REAL 1 House/Block/Lot No. Street BALOCAWEHAY Subdivision/Village Barangay ABUYOG LEYTE City/Municipality Province 6510
10. GSIS ID NO.	N/A	ZIP CODE	
11. PAG-IBIG ID NO.	1212-6156-0837		
12. PHILHEALTH NO.	13-252569384-1		
13. SSS NO.	34-8906297-0	19. TELEPHONE NO.	N/A
14. TIN NO.	757-522-380-00	20. MOBILE NO.	09559049714
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	eunicegalisim03@gmail.com

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	
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	GALISIM			
FIRST NAME	ANGEL	NAME EXTENSION (JR., SR)		
MIDDLE NAME	SOMBRIO			
25. MOTHER'S MAIDEN NAME	SAMAS			
SURNAME	GALISIM			
FIRST NAME	VIOLETA			
MIDDLE NAME	CALAPRE		(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/	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To	UNITS EARNED		
ELEMENTARY	BALOCAWEHAY CENTRAL SCHOOL	GRADUATE	2006	2011		2011	
SECONDARY	BALOCAWEHAY NATIONAL HIGH SCHOOL	GRADUATE	2011	2015		2015	
VOCATIONAL /	N/A	N/A					
COLLEGE	VISAYAS STATE UNIVERSITY	BS IN DEVELOPMENT EDUCATION MAJOR AGRICULTURAL EXTENSION	2015	2019		2019	
GRADUATE STUDIES	N/A	N/A					

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION

29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES		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			
N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
SINGING	N/A	N/A
DANCING		
WATCHING MOVIES		
COMPUTER LITERATE		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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