

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	ARGOTA		
FIRST NAME	ALISSA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	TABALNO		
3. DATE OF BIRTH (mm/dd/yyyy)	5/4/2000	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization P/s. indicate country:
4. PLACE OF BIRTH	TANAUAN, 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	333 IMPERIO House/Block/Lot No. Street ZONE 8 CANRAMOS Subdivision/Village Barangay TANAUAN LEYTE City/Municipality Province
7. HEIGHT (m)	1.65	ZIP CODE	
8. WEIGHT (kg)	54		
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	333 IMPERIO House/Block/Lot No. Street ZONE 8 CANRAMOS Subdivision/Village Barangay TANAUAN LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6502
11. PAG-IBIG ID NO.	121319579850		
12. PHILHEALTH NO.	13-251008624-8		
13. SSS NO.	06-4581514-2	19. TELEPHONE NO.	N/A
14. TIN NO.	626-255-836-00000	20. MOBILE NO.	09270333689
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	argotaalissa4@gmail.com

II. FAMILY BACKGROUND


22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NAME EXTENSION (JR., SR)			
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	ARGOTA			
FIRST NAME	ALEXANDER	NAME EXTENSION (JR., SR)		
MIDDLE NAME	BOCO			
25. MOTHER'S MAIDEN NAME				
SURNAME	TABALNO			
FIRST NAME	ELISA			
MIDDLE NAME	ODTUHAN			

(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	KILING ELEMENTARY SCHOOL	ELEMENTARY	2007	2013		2013	SALUTATORIAN
SECONDARY	ASIAN DEVELOPMENT FOUNDATION COLLEGE	SENIOR HIGH SCHOOL	2017	2019		2019	WITH HIGH HONORS
VOCATIONAL / TRADE COURSE							
COLLEGE	SAINT PAUL SCHOOL OF PROFESSIONAL STUDIES	BACHELOR OF SCIENCE IN ACCOUNTANCY	2019	2023		2023	
GRADUATE STUDIES							


(Continue on separate sheet if necessary)

SIGNATURE		DATE	11-24-2023
-----------	---	------	------------

[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	11-24-2023
------------------	---	-------------	------------

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

[illegible]

(Continue on separate sheet if necessary)

[illegible][illegible]

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
TIME MANAGEMENT		THE INSTITUTE OF CERTIFIED BOOKKEPEERS
SOFTWARE PROFICIENT		JUNIOR PHILIPPINE INSTITUTE OF ACCOUNTANTS - SPSPS CHAPTER
INTERPERSONAL SKILLS		
DETAIL-ORIENTED		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11-24-2023
-----------	---	------	------------

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: _____

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: _____

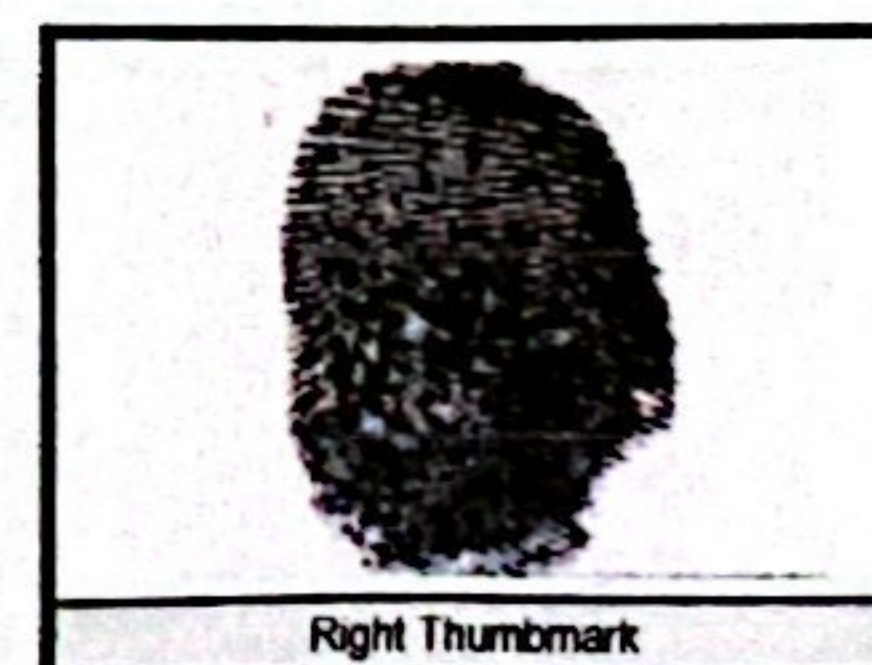
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL NO.
REY NINO S. LEE, CPA	TACLOBAN CITY	09452163699
DES DONILA	TACLOBAN CITY	09391091724

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.



PHOTO



Right Thumbmark

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

Government Issued ID: TIN ID

ID/License/Passport No.: 626-255-836-00000

Date/Place of Issuance: 05-12-2023

Signature (Sign inside the box)

11-24-23

Date Accomplished

SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath

WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word *Present*, e.g., 1998-Present. Work experience should be listed from most recent first.

- Duration: 100 hours
- Position: Intern
- Name of Office/Unit: Accounting Unit
- Immediate Supervisor: Juditha Avila
- Name of Agency/Organization and Location: POPCOM, Palo Leyte
- List of Accomplishments and Contributions (if any)
 - Preparation of Index of Payment
 - Recording transactions
- Summary of Actual Duties
 - Responsible in making the index of payment in order to record and monitor payments made to each creditor or payee. Also performed other tasks assigned by the immediate supervisor

- Duration: 100 hours
- Position: Intern
- Name of Office/Unit: Administrative Department
- Immediate Supervisor: Angel Soleta
- Name of Agency/Organization and Location: POPCOM, Palo Leyte
- List of Accomplishments and Contributions (if any)
 - Segregation of files
 - Preparation of disbursement vouchers
- Summary of Actual Duties
 - Responsible in performing administrative like the segregation of important papers to be submitted to COA, Disbursing Officer, and for the finance copy. Also performed other related functions.

ALISSA ARGOTA

(Signature over Printed Name
of Employee/Applicant)

Date: 11-24-2023


WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

- Duration: 200 hours
- Position: Intern
- Name of Office/Unit: Technical Department
- Immediate Supervisor: Cindy Soleta
- Name of Agency/Organization and Location: POPCOM, Palo Leyte
- List of Accomplishments and Contributions (if any)
 - Acknowledging of email
 - Inventory count of family planning commodities
 - Assisted in the conduct of family planning classes
- Summary of Actual Duties
 - Together with the POPCOM employees, we traveled to different places to conduct a RPFP class. Also assigned in preparing the kit that they will use for the classes. Performed other administrative tasks assigned by the immediate supervisor.

- Duration:
- Position:
- Name of Office/Unit:
- Immediate Supervisor:
- Name of Agency/Organization and Location:
- List of Accomplishments and Contributions (if any)
- Summary of Actual Duties

ALISSA  ARGOTA

(Signature over Printed Name
of Employee/Applicant)

Date: 11-24-2023