

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 box ☐) 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	LADOR		
FIRST NAME	ARIES MONCIAR	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	RAMOS		
3. DATE OF BIRTH (mm/dd/yyyy)	08/24/1989	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	MAASIN SOUTHERN LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6 CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	N/A PUROK TAMBIS House/Block/Lot No. Street N/A ASUNCION Subdivision/Village Barangay MAASIN CITY SOUTHERN LEYTE City/Municipality Province 6600
7. HEIGHT (m)	1.7525999	ZIP CODE	
8. WEIGHT (kg)	80		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	N/A PUROK TAMBIS House/Block/Lot No. Street N/A ASUNCION Subdivision/Village Barangay MAASIN SOUTHERN LEYTE City/Municipality Province 6600
10. GSIS ID NO.	N/A	ZIP CODE	
11. PAG-IBIG ID NO.	121001476868		
12. PHILHEALTH NO.	010511137107		
13. SSS NO.	3421126913	19. TELEPHONE NO.	N/A
14. TIN NO.	295609279	20. MOBILE NO.	+639954647309
15. AGENCY EMPLOYEE NO.	223	21. E-MAIL ADDRESS (if any)	ariesmonciarlador1989@gmail.com


II. FAMILY BACKGROUND










22. SPOUSE'S SURNAME	BASA-LADOR		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	JASMIN	NAME EXTENSION (JR., SR) N/A	REIZ SIMEON BASA LADOR	03/01/2019
MIDDLE NAME	PAJE		SHAWN FELMAR BASA LADOR	08/19/2020
OCCUPATION	GOVERNMENT EMPLOYEE			
EMPLOYER/BUSINESS NAME	DEPARTMENT OF ENVIRONMENT AND NATURALRESOURCES			
BUSINESS ADDRESS	CAPITOL SITE MAASIN CITY SOUTHERN LEYTE			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	LADOR			
FIRST NAME	ZOSIMO	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	CAWALING			
25. MOTHER'S MAIDEN NAME				
SURNAME	RAMOS			
FIRST NAME	MARIETA			
MIDDLE NAME	MILAGROSO		(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	ASUNCION ELEMENTARY SCHOOL	GRADE 6	06/01/1996	04/10/2002	GRADE 6	2002	N/A
SECONDARY	ICHON NATIONAL HIGH SCHOOL	FOURTH YEAR HIGH SCHOOL	06/08/2002	04/09/2006	4TH YEAR	2006	10TH HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	SAINT JOSEPH COLLEGE	BS COMMERCE-MANAGEMENT ACCOUNTING AND FINANCE	06/08/2006	03/27/2010	4TH YEAR	2010	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	March 9, 2023

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			
	ASUNCION INTEGRATED SCHOOL ALUMNI ASSOCIATION- MAASIN CITY SOUTHERN LEYTE	11/28/2019	11/25/2022	N/A	PUBLIC INFORMATION OFFICER	
	ASUNCION INTEGRATED SCHOOL ALUMNI ASSOCIATION- MAASIN CITY SOUTHERN LEYTE	01/01/2017	11/25/2019	N/A	DATA/INFORMATION SUPPORT STAFF	
	ASSUMPTION IN THE HILLS PARISH- MAASIN CITY SOUTHERN LEYTE	08/15/2009	05/30/2010	N/A	YOUTH LEADER	
(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			
(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)
	VIDEO MAKING/EDITING					ASUNCION INTEGRATED SCHOOL ALUMNI ASSOCIATION
	HOSTING EVENT					
	HIKING					
	COOKING					
	JOGGING					
	SINGING					
	DANCING					
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	March 9, 2023	

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person who has immediate supervision over you in the Bureau or Department where you will be appointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>																
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>																
	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>																
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>																
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?	<div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details: FINISHED CONTRACT-DSWD PROJECT DONE. _____</div>																
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?	<div><input checked="" type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>																
	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>																
39. Have you acquired the status of an immigrant or permanent resident of another country?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>																
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 a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div>																
	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>																
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41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)																	
<table><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr><tr><td>ENGR. CHRISTOPHER C. ARBIOL</td><td>MAASIN SOUTHERN LEYTE</td><td>*09771941421</td></tr><tr><td>MRS. ANAFRELYN SAMOSA</td><td>MAASIN SOUTHERN LEYTE</td><td>*09171065000</td></tr><tr><td>MR. RONNIE SALAS</td><td>MAASIN SOUTHERN LEYTE</td><td>*09067352908</td></tr></table>		NAME	ADDRESS	TEL. NO.	ENGR. CHRISTOPHER C. ARBIOL	MAASIN SOUTHERN LEYTE	*09771941421	MRS. ANAFRELYN SAMOSA	MAASIN SOUTHERN LEYTE	*09171065000	MR. RONNIE SALAS	MAASIN SOUTHERN LEYTE	*09067352908				
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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.																	
<table><tr><td colspan="2">Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID:</td><td>DRIVER'S LICENSE</td></tr><tr><td>ID/License/Passport No.:</td><td>H05-20-001866</td></tr><tr><td>Date/Place of Issuance:</td><td>06/04/2020/MAASIN CITY</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:	DRIVER'S LICENSE	ID/License/Passport No.:	H05-20-001866	Date/Place of Issuance:	06/04/2020/MAASIN CITY	<table><tr><td colspan="2"></td></tr><tr><td colspan="2">Signature (Sign inside the box)</td></tr><tr><td colspan="2">March 9, 2023</td></tr><tr><td colspan="2">Date Accomplished</td></tr></table>			Signature (Sign inside the box)		March 9, 2023		Date Accomplished	
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SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.																	
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