

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	ARRADAZA		
FIRST NAME	KYLE ROSARIO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ROCES		
3. DATE OF BIRTH (mm/dd/yyyy)	10/28/2001	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	BAYBAY CITY, 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	169 RAMON MAGSAYSAY STREET House/Block/Lot No. Street POBLACION ZONE 17 Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.54 m	ZIP CODE	6521
8. WEIGHT (kg)	56 kg		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	169 RAMON MAGSAYSAY STREET House/Block/Lot No. Street POBLACION ZONE 17 Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6521
11. PAG-IBIG ID NO.	121353579880		
12. PHILHEALTH NO.	13-250362346-7	19. TELEPHONE NO.	N/A
13. SSS NO.	N/A	20. MOBILE NO.	0926 490 4793
14. TIN NO.	656-532-598-00000	21. E-MAIL ADDRESS (if any)	kyroarra7@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	
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	ARRADAZA			
FIRST NAME	GILDO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	PARAISO			
25. MOTHER'S MAIDEN NAME				
SURNAME	ROCES			
FIRST NAME	FLORDELIZA			
MIDDLE NAME	MANAGBANAG		<i>(Continue on separate sheet if necessary)</i>	

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	CARIDAD ELEMENTARY SCHOOL	N/A	2008	2014	N/A	2014	SALUTORIAN
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	N/A	2014	2018	N/A	2018	WITH HIGHEST HONORS
SENIOR HIGH SCHOOL	VISAYAS STATE UNIVERSITY INTEGRATED HIGH SCHOOL	SCIENCE, TECHNOLOGY, ENGINEERING, and MATHEMATICS (STEM)	2018	2020	N/A	2020	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN CHEMISTRY	2020	2024	N/A	2024	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

SIGNATURE		DATE	
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IV. CIVIL SERVICE ELIGIBILITY

27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	CHEMICAL TECHNICIAN	86.5	10/16/2024	TACLOBAN CITY	N/A	N/A

(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.

28.	INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable) & STEP (Format "00-0") INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/ N)
	From	To						
	08/12/2024	12/27/2024	PART-TIME	DEPARTMENT OF PURE AND APPLIED CHEMISTRY	182/hr	N/A	TEMPORARY	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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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		
	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

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			
	2024 Exit Conference for DOST-SEI Graduating Scholars	09/12/2022	09/15/22	8.0	Technical	DOST-SEI
	Environmental Health and Safety: Chemical Waste Management	06/27/2022	06/27/2022	8.0	Technical	Department of Pure and Applied Chemistry, VSU-Main, Baybay City, Leyte
	DOST-SEI Scholars' Values Formation Program	03/26/2021	03/26/2021	8.0	Technical	DOST-SEI
	SEARCA BIC Agri-biotech Boot Camp	10/06/2018	10/08/2018	24.0	Technical	SEARCA Biotechnology Information Center
	Visayas State University Faculty Onboarding	08/12/2024	08/12/2024	8.0	Technical	Visatas State University

(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)

(Continue on separate sheet if necessary)

SIGNATURE	DATE	
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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?

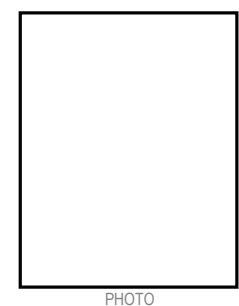
YES NO
 If YES, please specify: _____

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)

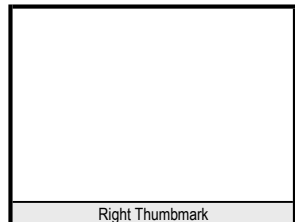
NAME	ADDRESS	TEL. NO.
Sheerwina Mae G. Balotite	Brgy. Guadalupe, Baybay City, Leyte	
Allan A. Ramal	Brgy. Malinao, Mahaplag, Leyte	
Mark Ryan R. Tripole	Brgy. Suguinon, Albuera, Leyte	



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.

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i>	
Government Issued ID:	PhylSys ID
ID/License/Passport No.:	4106-5942-1856-3803
Date/Place of Issuance:	06/11/2021

Signature (Sign inside the box)
Date Accomplished



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

 Person Administering Oath