

# 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	BUG-ATAN		
FIRST NAME	MARJORIE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	BUQUIRAN		
3. DATE OF BIRTH (mm/dd/yyyy)	9/18/1995	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	Baybay Public Hospital	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 BRGY. UGUIIS Subdivision/Village MAHAPLAG LEYTE City/Municipality Province ZIP CODE 6512
7. HEIGHT (m)	1.52m	18. PERMANENT ADDRESS	House/Block/Lot No. Street BRGY. UGUIIS Subdivision/Village MAHAPLAG LEYTE City/Municipality Province ZIP CODE 6512
8. WEIGHT (kg)	65.7kg		
9. BLOOD TYPE	O		
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	121168411508		
12. PHILHEALTH NO.	12-025513336-0		
13. SSS NO.	06-3806025-0	19. TELEPHONE NO.	
14. TIN NO.	777-368-704-00000	20. MOBILE NO.	0965-128-2433 or 0999-429-8720
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	marjoriebugatan7@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	N/A	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	BUG-ATAN			
FIRST NAME	JOSE	NAME EXTENSION (JR., SR)		
MIDDLE NAME	DUARTE			
25. MOTHER'S MAIDEN NAME	CASAL			
SURNAME	BUG-ATAN			
FIRST NAME	MARIZA			
MIDDLE NAME	BUQUIRAN		(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	ST.BRIGIDS ELEMENTARY SCHOOL	PRIMARY EDUCATION	2002	2008	GRADUATED	2008	N/A
SECONDARY	MAHAPLAG NATIONAL HIGHSCHOOL	SECONDARY EDUCATION	2008	2012	GRADUATED	2012	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN HOTEL, RESTAURANT AND TOURISM MANAGEMENT	2012	2016	GRADUATED	2016	N/A
GRADUATE STUDIES	FRANCISCAN COLLEGE OF IMMACULATE CONCEPCION	BACHELOR OF SCIENCE IN SECONDARY EDUCATION	2019	2020	GRADUATED	2020	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	7 - 9 - 21	CS FORM 212 (Revised 2017), Page 1 of 4
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[illegible]

VII. LEARNING AND DEVELOPMENT (L&amp;D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

## VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
READING	N/A	N/A
WRITING	N/A	N/A
ARTS	N/A	N/A
MUSIC	N/A	N/A
SPORTS	N/A	N/A

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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?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

b. Have you been criminally charged before any court?

☐ 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: \_\_\_\_\_

RESIGNATION: Resigned due to family matters.

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

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: \_\_\_\_\_

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?

☐ YES ☒ NO

If YES, please specify: \_\_\_\_\_

b. Are you a person with disability?

☐ YES ☒ NO

If YES, please specify ID No: \_\_\_\_\_

c. Are you a solo parent?

☐ YES ☒ NO

If YES, please specify ID No: \_\_\_\_\_

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

NAME	ADDRESS	TEL. NO.
KLENEE GRACE A. ACEDILLA	42A MABINI STREET, BAYBAY CITY LEYTE	9563593230
LAWRENCE BERING	P. RODRIGUEZ ST. LOOC, LAPU LAPU CITY, CEBU	99748019897



PHOTO

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.)  
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: LAND TRANSPORTATION OFFICE

ID/License/Passport No.: H12-12-002111

Date/Place of Issuance: 9/6/2018

Signature (Sign inside the box)

7-9-21  
Date Accomplished



Right Thumbmark

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

Person Administering Oath