

# 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	Gortipacion		
FIRST NAME	Joann	N/A	
MIDDLE NAME	Malbas		
3. DATE OF BIRTH (mm/dd/yyyy)	02/17/1999	16. CITIZENSHIP	Pls. indicate country:
4. PLACE OF BIRTH	Baybay, Leyte	Filipino	
5. SEX	Female	If holder of dual citizenship, please indicate the details.	
6. CIVIL STATUS	Single	17. RESIDENTIAL ADDRESS	N/A
7. HEIGHT (m)	1.51m	ZIP CODE	House/Block/Lot No. <i>Street</i>
8. WEIGHT (kg)	51kg		N/A <i>Gacat</i>
9. BLOOD TYPE	Unknown		Subdivision/Village <i>Barangay</i>
10. GSIS ID NO.	N/A		Baybay City <i>Leyte</i>
11. PAG-IBIG ID NO.	1212-5585-8508		City/Municipality <i>Province</i>
12. PHILHEALTH NO.	1302-5537-5521	ZIP CODE	6521
13. SSS NO.	06-4310612-5	18. PERMANENT ADDRESS	N/A
14. TIN NO.	N/A	ZIP CODE	House/Block/Lot No. <i>Street</i>
15. AGENCY EMPLOYEE NO.	N/A		N/A <i>Gacat</i>
			Subdivision/Village <i>Barangay</i>
			Baybay City <i>Leyte</i>
			City/Municipality <i>Province</i>
		ZIP CODE	6521
		19. TELEPHONE NO.	N/A
		20. MOBILE NO.	09552195047
		21. E-MAIL ADDRESS (if any)	joanngortipacion17@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	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	Gortipacion			
FIRST NAME	Francis	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	Carbon			
25. MOTHER'S MAIDEN NAME				
SURNAME	Malbas			
FIRST NAME	Florencia			
MIDDLE NAME	Toco		(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	Gacat Elementary School	Elementary Education	2005	2011	N/A	2011	N/A
SECONDARY	Baybay National High School	Highschool	2011	2015	N/A	2015	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 Agriculture Major in Horticulture	2015	2020	N/A	2020	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**



#### IV. CIVIL SERVICE ELIGIBILITY

[illegible]

**(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.*

[illegible]


(Continue on separate sheet if necessary)

SIGNATURE



**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

(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			
	Training on Bonsai Marketing	04/21/2018	04/21/2018	2		DR. ROSARIO A. SALAS
	Seminar on Disaster Risk Reduction	10/14/2017	10/14/2017	2		ANDY PHIL D. CORTES
	Scientific Writing Seminar	04/28/2018	04/28/2018	2		DR.BERTA C. RATILLA

(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)
	Microsoft Word, Excel, and Powerpoint		N/A		N/A

(Continue on separate sheet if necessary)		
SIGNATURE		

<p>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,</p> <p>a. within the third degree? No</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)? No</p>	<p>If YES, give details: _____</p> <p style="text-align: center;">N/A</p>													
<p>35. a. Have you ever been found guilty of any administrative offense? No</p> <p>b. Have you been criminally charged before any court? No</p>	<p>If YES, give details: _____</p> <p style="text-align: center;">N/A</p> <p>If YES, give details: _____</p> <p style="text-align: center;">N/A</p> <p>Date Filed: _____</p> <p>Status of Case/s: _____</p>													
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal? No</p>	<p>If YES, give details: _____</p> <p style="text-align: center;">N/A</p>													
<p>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</p>	<p>If YES, give details: _____</p> <p style="text-align: center;">N/A</p>													
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? No</p> <p>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? No</p>	<p>If YES, give details: _____</p> <p style="text-align: center;">N/A</p> <p>If YES, give details: _____</p> <p style="text-align: center;">N/A</p>													
<p>39. Have you acquired the status of an immigrant or permanent resident of another country? No</p>	<p>If YES, give details (country): _____</p> <p style="text-align: center;">N/A</p>													
<p>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:</p> <p>a. Are you a member of any indigenous group? No</p> <p>b. Are you a person with disability? No</p> <p>c. Are you a solo parent? No</p>	<p>If YES, please specify: _____</p> <p style="text-align: center;">N/A</p> <p>If YES, please specify ID No: _____</p> <p style="text-align: center;">N/A</p> <p>If YES, please specify ID No: _____</p> <p style="text-align: center;">N/A</p>													
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>EMILY B. BARBOSA</td> <td>Pangasugan Baybay City, Leyte</td> <td>9365213898</td> </tr> <tr> <td>ROSE MARY OQUIAS</td> <td>Kilim, Baybay City Leyte</td> <td>9352468166</td> </tr> <tr> <td>SANTOS VILLOCINO</td> <td>Visca, Baybay City Leyte</td> <td>9176333687</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	EMILY B. BARBOSA	Pangasugan Baybay City, Leyte	9365213898	ROSE MARY OQUIAS	Kilim, Baybay City Leyte	9352468166	SANTOS VILLOCINO	Visca, Baybay City Leyte	9176333687	
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<p>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.</p>														
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Person Administering Oath