

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 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	LACABA		
FIRST NAME	JUAN PAOLO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	SUPERABLE		
3. DATE OF BIRTH (mm/dd/yyyy)	05/15/1987	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	TACLOBAN CITY	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input 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 KALIPAYAN BLISS BRGY 62-B Subdivision/Village Barangay TACLOBAN CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.651	ZIP CODE	
8. WEIGHT (kg)	77		
9. BLOOD TYPE	B POSITIVE	18. PERMANENT ADDRESS	House/Block/Lot No. Street KALIPAYAN BLISS BRGY 62-B Subdivision/Village Barangay TACLOBAN CITY LEYTE City/Municipality Province
10. GSIS ID NO.		ZIP CODE	
11. PAG-IBIG ID NO.	121057731504		
12. PHILHEALTH NO.			6500
13. SSS NO.	34-1748585-9	19. TELEPHONE NO.	
14. TIN NO.	284-710-836-000	20. MOBILE NO.	+63961-464-7711 / +63912-709-4197
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	jupaolacaba.19@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	NONE		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)	NONE	
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	LACABA			
FIRST NAME	JUAN	NAME EXTENSION (JR., SR)		
MIDDLE NAME	MALATE			
25. MOTHER'S MAIDEN NAME	MILA DELDA SUPERABLE			
SURNAME	LACABA			
FIRST NAME	MILA			
MIDDLE NAME	SUPERABLE		(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	RIZAL CENTRAL SCHOOL		1995	2001		2001	
SECONDARY	CIRILO ROY MONTEJO NATIONAL HIGH SCHOOL		2001	2005		2005	
VOCATIONAL / TRADE COURSE							
COLLEGE	SAINT PAUL SCHOOL OF PROFESSIONAL STUDIES	BS ACCOUNTING TECHNOLOGY & BS REAL ESTATE MANAGEMENT	2015	2020		2020	
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE	DATE	February 9, 2022
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