

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	ORTEGA		
FIRST NAME	MARIA JAVA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ABELLANA		
3. DATE OF BIRTH (mm/dd/yyyy)	12/11/1992	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	PARAÑAQUE CITY	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	House/Block/Lot No. Street STA. CRUZ Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.53m	ZIP CODE	6521
8. WEIGHT (kg)	85.5kg		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	House/Block/Lot No. Street STA. CRUZ Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6521
11. PAG-IBIG ID NO.	1212-4418-2416		
12. PHILHEALTH NO.	13-025525485-6		
13. SSS NO.	34-8202038-8	19. TELEPHONE NO.	N/A
14. TIN NO.	356-230-892	20. MOBILE NO.	0906-9046-182 / 0947-667-3280
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	mariajavaortega1211@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		NAME EXTENSION (JR., SR)	N/A	
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	ORTEGA			
FIRST NAME	BENITO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	CANO			
25. MOTHER'S MAIDEN NAME				
SURNAME	AVELLANA			
FIRST NAME	LOLITA			
MIDDLE NAME	DELANTAR		(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	Franciscan College of the Immaculate Conception	Grade 1 - 6	1999	2005		2005	Honorable Mention
SECONDARY	Araullo High School	1st - 4th year Highschool	2005	2009		2009	
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A		N/A	
COLLEGE	Adamson University Philippine Christian University - Manila	Bachelor of Science in Accountancy	2012	2018		2018	
GRADUATE STUDIES	N/A	N/A	N/A	N/A		N/A	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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[illegible]

V. WORK EXPERIENCE
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

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[illegible]

SIGNATURE		, DATE	
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[illegible]

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED	
1. Name of the program	
2. Description of the program	
3. Date of the program	
4. Location of the program	
5. Duration of the program	
6. Number of participants	
7. Cost of the program	
8. Sponsor of the program	
9. Other relevant information	

[illegible]

VIII. OTHER INFORMATION

[illegible]

SIGNATURE		DATE	
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DATE _____

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)?	<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: Sale and transfer of ownership _____</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 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 items: 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> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
Sophia Noreene A. Oñate	Palompon, Leyte	0917-103-9176
Anna Grace M. Monte	Ormoc, Leyte	0977-820-5581
Salvio B. Cantiga Jr	Albuera, Leyte	0926-294-9519
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.		



PHOTO

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	
Government Issued ID:	Philippine Identification Card
ID/License/Passport No.:	5283-2597-80560-3490
Date/Place of Issuance:	10/25/2021

Signature (Sign inside the box)
Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this **FEB 05 2024**, affiant exhibiting his/her validly issued government ID as indicated above.

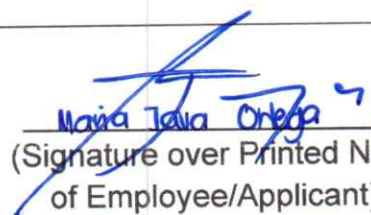
JOSEPH G. JERVISO Notary Public for Baybay City Mahaplag, and Albuera, Leyte NC No. B-23-01-01 until December 31, 2024 R. Magsaysay Avenue, Baybay City, Leyte PTR No. 7433477/Albuera Leyte/ 1-3-23 IBP No. 1d1010/Pasay City/12-22-23 TIN No. 816-790-898/Bolt No. 2023 MCLE Completed 12-19-23
Person Administering Oath

WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

- Duration: March 11, 2019 – present
- Position: Accounting Assistant
- Name of Office/Unit: Administrative/Accounting Department
- Immediate Supervisor: Anna Grace Monte / Salvio Cantiga
- Name of Agency/Organization and Location: DBSN Farms Agriventures Corp., Albuera, Leyte
- Summary of Actual Duties
 - Management of petty cash transactions.
 - Controlling credit and ensuring debtors pay on time.
 - Reconciliation of direct debits and finance accounts.
 - Ensuring all payments amounts & records are accurate.
 - Preparation of statutory accounts.
 - Working with journals, sales & purchase ledgers and spreadsheets.
 - Sorting out incoming and outgoing daily post and answering any queries.
 - Responsible in checking payroll accounts.
 - Updating paperwork, maintaining documents and word processing
 - Performing general office clerk duties and errands.


(Signature over Printed Name
of Employee/Applicant)

Date: _____