

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	MOLDEZ		
FIRST NAME	SHEKAINAH MAE	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	LINA		
3. DATE OF BIRTH (mm/dd/yyyy)	3/9/1997	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 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	ZONE 5 SITIO COLO House/Block/Lot No. Street N/A CARIDAD Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.55	ZIP CODE	6521
8. WEIGHT (kg)	56		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	ZONE 5 SITIO COLO House/Block/Lot No. Street N/A CARIDAD Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6521
11. PAG-IBIG ID NO.	1212-6192-9456		
12. PHILHEALTH NO.	13-250354613-6		
13. SSS NO.	06-3976579-0	19. TELEPHONE NO.	N/A
14. TIN NO.	N/A	20. MOBILE NO.	09677007903
15. AGENCY EMPLOYEE NO.	MSML102619	21. E-MAIL ADDRESS (if any)	moldezshekainah@gmail.com
II. FAMILY BACKGROUND			
22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A	N/A
MIDDLE NAME	N/A		N/A
OCCUPATION	N/A		N/A
EMPLOYER/BUSINESS NAME	N/A		N/A
BUSINESS ADDRESS	N/A		N/A
TELEPHONE NO.	N/A		N/A
24. FATHER'S SURNAME	MOLDEZ		N/A
FIRST NAME	RICARDO	NAME EXTENSION (JR., SR) N/A	N/A
MIDDLE NAME	MANAGBANAG		N/A
25. MOTHER'S MAIDEN NAME			N/A
SURNAME	LINA		N/A
FIRST NAME	ALMA		N/A
MIDDLE NAME	BULFA		(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 From To
ELEMENTARY	CARIDAD ELEMENTARY SCHOOL	PRIMARY EDUCATION	2003 2009
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	HIGH SCHOOL	2009 2013
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A N/A
COLLEGE	WESTERN LEYTE COLLEGE	BS ACCOUNTING TECHNOLOGY	2013 2017
COLLEGE	SAINT PETER'S COLLEGE	BS ACCOUNTANCY	2017 2019
GRADUATE STUDIES	N/A	N/A	N/A N/A
(Continue on separate sheet if necessary)			
SIGNATURE		DATE	02/n/2021

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		DATE	02/17/2021
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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
	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A
	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			
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A

(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)
	ANALYTICAL		N/A		JUNIOR PHILIPPINE INSTITUTE OF ACCOUNTANTS
	MICROSOFT PROGRAMS		N/A		NATIONAL FEDERATION OF JUNIOR PHILIPPINE INSTITUTE OF ACCOUNTANTS
	FINANCIAL RECORD AND PROCESSING		N/A		N/A
	FILE OR RECORD MAINTENANCE		N/A		N/A
	TIME MANAGEMENT		N/A		N/A
	KNOWLEDGABLE IN SAP SYSTEM		N/A		N/A
	COMPUTER LITERACY		N/A		N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	02/17/2021
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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.
ELIZALDE A. ADALLA	ORMOC CITY	9171070007
ROSA MAE BOHOL	ORMOC CITY	9175751389
JOY BACOIY	ORMOC CITY	9159606793

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: PASSPORT

ID/License/Passport No.: P4055180A

Date/Place of Issuance: 08/16/2017 / DFA TACLOBAN

Signature (Sign inside the box)

02 / 17 / 2021

Date Accomplished

SUBSCRIBED AND SWORN to before me this 17th day of FEBRUARY, 2021, affiant exhibiting his/her validly issued government ID as indicated above.

SHEKAWAH MAE ADALDEZ

Person Administering Oath

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