

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.

4. GS ID No. (Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	SUMILE		
FIRST NAME	FLORA MAE	NAME EXTENSION (JR., SR.)	
MIDDLE NAME	AMUD		
3. DATE OF BIRTH (mm/dd/yyyy)	8/29/1999	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	MAASIN CITY, SOUTHERN LEYTE	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	Pls. indicate country:	
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	51 CATMONAN ST.
7. HEIGHT (m)	1.67	House/Block/L of No.	Street
8. WEIGHT (kg)	58	Subdivision/Village	LABRADOR
9. BLOOD TYPE	A+	HINUNANGAN	Barangay
10. GSIS ID NO.		City/Municipality	SO. LEYTE
11. PAG-IBIG ID NO.	4243-4230-2847	ZIP CODE	Province
12. PHILHEALTH NO.	43-251640382-2	18. PERMANENT ADDRESS	51 CATMONAN ST.
13. SSS NO.	06-4519092-2	House/Block/L of No.	Street
14. TIN NO.	618-991-278	Subdivision/Village	LABRADOR
15. AGENCY EMPLOYEE NO.		HINUNANGAN	Barangay
		City/Municipality	SO. LEYTE
		ZIP CODE	Province
		19. TELEPHONE NO.	6608
		20. MOBILE NO.	0963 187 4403
		21. E-MAIL ADDRESS (if any)	sumile.floramae99@gmail.com

II. FAMILY BACKGROUND

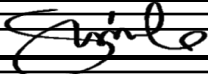
22. SPOUSE'S SURNAME	N/A	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	N/A	N/A
MIDDLE NAME	N/A		
OCCUPATION	N/A		
EMPLOYER/BUSINESS NAME	N/A		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	N/A		
24. FATHER'S SURNAME	SUMILE		
FIRST NAME	BENIGNO		
MIDDLE NAME	CORDA		
25. MOTHER'S MAIDEN NAME	AMUD		
SURNAME	SUMILE		
FIRST NAME	NORMA		
MIDDLE NAME	MILLARE		

(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	HINUNANGAN WEST CENTRAL SCHOOL	ELEMENTARY STUDIES	2005	2012		2012	CLASS 6TH HONORABLE MENTION
SECONDARY	CANIPAAN NATIONAL HIGH SCHOOL	HIGH SCHOOL STUDIES	2012	2016		2016	
SENIOR HIGH / VOCATIONAL / TRADE COURSE	HINUNANGAN NATIONAL HIGH SCHOOL	SENIOR HIGH SCHOOL STUDIES	2016	2018		2018	
COLLEGE	SOUTHERN LEYTE STATE UNIVERSITY	BACHELOR OF TECHNOLOGY AND LIVELIHOOD EDUCATION	2018	2022		2022	
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	January 03, 2025
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(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)

[illegible]


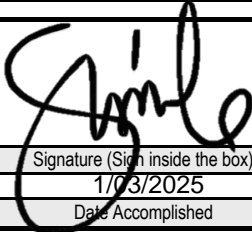
(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Strong interpersonal and multitasking skills		Phillipine Association For Teachers Education Inc.
Can work under pressure		
Proficient in MS Office		
Analytical skill and keen to details		
Ability to work independently or part of a team		
Reading books and articles		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	January 03, 2025
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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)?		<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: Resignation due to board exam</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 specifv ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)														
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>Maricris S. Estubio, Ed.D.</td><td>San Juan, Southern Leyte</td><td>09090489878</td></tr><tr><td>Ryan C. Negros, MM</td><td>Anahawan, Southern Leyte</td><td>09988571858</td></tr><tr><td></td><td></td><td></td></tr></table>			NAME	ADDRESS	TEL. NO.	Maricris S. Estubio, Ed.D.	San Juan, Southern Leyte	09090489878	Ryan C. Negros, MM	Anahawan, Southern Leyte	09988571858			
NAME	ADDRESS	TEL. NO.												
Maricris S. Estubio, Ed.D.	San Juan, Southern Leyte	09090489878												
Ryan C. Negros, MM	Anahawan, Southern Leyte	09988571858												
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.		<div></div> <div>PHOTO</div>												
<div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: PRC - Professional ID</div> <div>ID/License/Passport No.: 2 2 3 3 4 9 1</div> <div>Date/Place of Issuance: August 19, 2024 - Maasin City, Southern Leyte</div>	<div></div> <div>Signature (Sign inside the box)</div> <div>1/03/2025</div> <div>Date Accomplished</div>	<div></div> <div>Right Thumbmark</div>												
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.														
<div></div> <div>Person Administering Oath</div>														