

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 if accomplished through own handwriting. Tick appropriate boxes ☐ and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE.

I. PERSONAL INFORMATION			
1. SURNAME	MILLEZA		
2. FIRST NAME	MYRA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	RUIZ		
3. DATE OF BIRTH (dd/mm/yyyy)	10.7.83	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	BAYBAY CITY, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX AT BIRTH	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6 CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	Purok I House/Block/Lot No. Street N/A GABAS Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.59	ZIP CODE	6521
8. WEIGHT (kg)	60		
9. BLOOD TYPE	AB+	18. PERMANENT ADDRESS	Purok I House/Block/Lot No. Street N/A GABAS Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
10. UMID ID NO.		ZIP CODE	6521
11. PAG-IBIG ID NO.	1212-0522-2405		
12. PHILHEALTH NO.	13-025159829-1		
13. PhilSys Number (PSN):		19. TELEPHONE NO.	N/A
14. TIN NO.	475-532-303-000	20. MOBILE NO.	0975-732-1363
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	myra.milleza@vsu.edu.ph

II. FAMILY BACKGROUND				
22. SPOUSE'S SURNAME	MILLEZA	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (dd/mm/yyyy)	
FIRST NAME	EDWIN	NAME EXTENSION (JR., SR)	MARY JOYCE R. MILLEZA	16.8.96
MIDDLE NAME	ISRAEL		KENNETH CARL R. MILLEZA	2.11.99
OCCUPATION	DRIVER/OPERATOR/CHAIRMAN (BANTRANSCO)		TRICIA MAE R. MILLEZA	4.2.02
EMPLOYER/BUSINESS NAME	BANTRANSCO		KHAYCEE R. MILLEZA	6.2.04
BUSINESS ADDRESS	GABAS, BAYBAY CITY, LEYTE		MARIA RHYZA R. MILLEZA	8.9.11
TELEPHONE NO.	0965-492-2886			
24. FATHER'S SURNAME	RUIZ			
FIRST NAME	MAXIMO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	QUESTA			
25. MOTHER'S MAIDEN NAME				
SURNAME	GALVEZ			
FIRST NAME	MARIANITA			
MIDDLE NAME	CORDOVA			
(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	PADRE BURGOS ELEM. SCHOOL	ELEMENTARY	1982	1988	GRADUATED	1988	N/A
SECONDARY	ARELLANO UNIVERSITY	HIGH SCHOOL	1988	1992	GRADUATED	1992	NA
VOCATIONAL / TRADE COURSE	FRANCISCAN COLLEGE IMMACULATE CONCEPTION	COMPUTER SECRETARIAL	1993	1995	GRADUATED	1995	N/A
COLLEGE	N/A	N/A	N/A	N/A	N/A	N/A	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		DATE	OCTOBER 2, 2025


[illegible]




V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

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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 (dd/mm/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK	
		From	To			
	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 (dd/mm/yyyy)		NUMBER OF HOURS	Type of L&D (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	Orientation on the Basics of Government Procurement with the New Government Procurement Act (RE 12009)	8/18/25	8/19/25	16.0	Technical	VISAYAS STATE UNIVERSITY
	Orientation on the Roles and Responsibilities of Document and Records Controllers, including a Recascading of Document and Records Control Processes and Guidelines	9.4.25	9.4.25	8.0	Technical	VISAYAS STATE UNIVERSITY
	ISO 9001:2015 Awareness and Re-awareness Seminar via ZOOM	9.5.25	9.5.25	4.0	Technical	VISAYAS STATE UNIVERSITY
	Orientation on Financial Management Transactions in VSU	3/13/24	3/13/24	8.0	Technical	VISAYAS STATE UNIVERSITY
	Basic Course Training on the RA 9184 and its Revised Implementing Rules and Regulations Act 2016	11/26/24	11/26/24	24.0	Technical	VISAYAS STATE UNIVERSITY
	Seminar Workshop on Basic Records and Archives Management (BRAM)	7/30/25	7/31/25	16.0	Technical	VISAYAS STATE UNIVERSITY
	Orientation of Guidelines and Procedures on processes/services uder Administration Services Office (ASO)	2/23/24	2/23/24	8.0	Technical	VISAYAS STATE UNIVERSITY
	HRIS Software Onboarding	12.6.23	12.6.23	8.0	Technical	VISAYAS STATE UNIVERSITY
	The 5S Resolution for Clerks and Heads	11/29/23	11/29/23	8.0	Technical	VISAYAS STATE UNIVERSITY
	ISO 9001:2015 Awareness and Re-awareness Webinar	8/29/23	8/29/23	8.0	Technical	VISAYAS STATE UNIVERSITY
	Basic Course Training for the Republic Act No. 9184 and its 2016 Revised Implementing Rules and Regulations	8/22/23	8/23/23	24.0	Technical	VISAYAS STATE UNIVERSITY
	ISO 9001::2015 Awarenes/Re-awareness Webinar	8/30/22	8/31/22	16.0	Technical	VISAYAS STATE UNIVERSITY
	Document Tracking System	11/13/20	11/13/20	3.0	Technical	VISAYAS STATE UNIVERSITY
(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)	
	COMPUTER SKILLS (MS WORD, EXCEL, POWERPOINT, PUBLISHER, ETC.)	N/A				
	COMMUNICATION SKILLS					
	MANAGEMENT SKILLS					
	SELF MOTIVATION					
	ADAPTABILITY					
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	SEPTEMBER 2, 2025	

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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</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, as amended); and (c) Expanded Solo Parents Welfare Act (RA 11861), 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)														
<table><thead><tr><th>NAME</th><th>OFFICE / RESIDENTIAL ADDRESS</th><th>CONTACT NO. AND/OR EMAIL</th></tr></thead><tbody><tr><td>JESSAMINE C. ECLEO</td><td>PROCUREMENT VISCA BAYBAY CITY, LEYTE</td><td></td></tr><tr><td>ELIZABETH S. QUEVEDO</td><td>DOPAC, VISCA, BAYBAY CITY, LEYTE</td><td></td></tr><tr><td>MANOLO B. LORETO</td><td>VISCA, BAYBAY CITY, LEYTE</td><td></td></tr></tbody></table>		NAME	OFFICE / RESIDENTIAL ADDRESS	CONTACT NO. AND/OR EMAIL	JESSAMINE C. ECLEO	PROCUREMENT VISCA BAYBAY CITY, LEYTE		ELIZABETH S. QUEVEDO	DOPAC, VISCA, BAYBAY CITY, LEYTE		MANOLO B. LORETO	VISCA, BAYBAY CITY, LEYTE		<div> PHOTO</div> <div> Right Thumbmark</div>
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MANOLO B. LORETO	VISCA, BAYBAY CITY, LEYTE													
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>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: _____</div> <div>ID/License/Passport No.: P2844704c</div> <div>Date/Place of Issuance: 1/28/2023</div>	<div> Signature (Sign inside the box) 10/2/2025 Date Accomplished</div>													
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.														
<div>ATTY. KAREN ABEGAIL S. MONTERON</div> <div>Person Administering Oath</div>														