

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	BALORE		
FIRST NAME	JULIBERT	NAME EXTENSION (JR., SR) JR	
MIDDLE NAME	NOYNOYAN		
3. DATE OF BIRTH (mm/dd/yyyy)	9/14/1998	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	SILAE, MALAYBALAY CITY BUKIDNON	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:		
7. HEIGHT (m)	1.6256	17. RESIDENTIAL ADDRESS	2677 GLADIOLA ST House/Block/Lot No. Street GOODWILL SUBD. TAMBO Subdivision/Village Barangay PARANAQUE CITY NCR City/Municipality Province
8. WEIGHT (kg)	68	ZIP CODE	1301
9. BLOOD TYPE		18. PERMANENT ADDRESS	House/Block/Lot No. Street SILAE Subdivision/Village Barangay MALAYBALAY CITY BUKIDNON City/Municipality Province
10. GSIS ID NO.		ZIP CODE	8700
11. PAG-IBIG ID NO.	1212 7023 1856	19. TELEPHONE NO.	
12. PHILHEALTH NO.	15-250216466-4	20. MOBILE NO.	09158232421
13. SSS NO.	34-9367489-1	21. E-MAIL ADDRESS (if any)	jnbalore@up.edu.ph
14. TIN NO.	500-642-632		
15. AGENCY EMPLOYEE NO.			

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	BALORE			
FIRST NAME	JULIBERT	NAME EXTENSION (JR., SR) JR		
MIDDLE NAME	GUDMALIN			
25. MOTHER'S MAIDEN NAME	CONEJO			
SURNAME	BALORE			
FIRST NAME	JEANETTE			
MIDDLE NAME	NOYNOYAN		(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	INDALASA ELEMENTARY SCHOOL	ELEMENTARY	6/5/2006	3/30/2011		2011	

SECONDARY	SILAE NATIONAL HIGH SCHOOL	SECONDARY	6/6/2011	3/31/2015		2015	SALOTAT RIAN/ CITY SCHOLAR
VOCATIONAL / TRADE COURSE							
COLLEGE	BUKIDNON STATE UNIVERSITY	BACHELOR OF PHYSICAL EDUCATION MAJOR IN SCHOOL PHYSICAL EDUCATION	6/6/2015	4/7/2019		2019	
GRADUATE STUDIES	UNIVERSITY OF THE PHILIPPINES-DILIMAN	MASTER OF SCIENCE IN HUMAN MOVEMENT SCIENCE	8/6/2021	PRESENT	6 UNITS		
(Continue on separate sheet if necessary)							
SIGNATURE			DATE		January 17, 2022		

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	01/17/2022
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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	
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31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
READING		INTERNATIONAL ASSOCIATION OF HEALTH, SPORTS AND KINESIOLOGY
		PHILIPPINE ASSOCIATION FOR TEACHERS AND EDUCATORS

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/17/2022
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<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <hr/> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">Status of Case/s: _____</p>
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.

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: PHILHEALTH ID: 15-250216466-4
ID/License/Passport No.: PRC LICENSE: 1874788
Date/Place of Issuance: 01/17/2022 TACUBID CITY

Signature (Sign inside the box)
01/17/2022



Date/Place of Issuance: 02/19/2020 TAGUM CITY

Date Accomplished

Right Thumbmark

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

Person Administering Oath