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 ACCOMPI Print legibly. Tick appropriate boxes []) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT A | | | | PDS FORM. | 1. CS ID No. | | (Do not fill up. | For CSC use only) |
| I. PERSONAL INFORMATION | | With not applicable. Bo Not 7 | DDI(EVI)(TE | | 11 00 15 110. | | (= 0 | |
| 2. SURNAME | LINGATONG | | | | | | | |
| FIRST NAME | RONAN | | | | | NAME EXTENSION (JR | ., SR) | |
| MIDDLE NAME | RAMIREZ | | | | | | | |
| 3. DATE OF BIRTH | IVAMINEZ | 4C OITIZENOUID | | | | _ | | |
| (mm/dd/yyyy) | | 16. CITIZENSHIP | | Filipino Dual Citizenship | | | by naturalization | |
| 4. PLACE OF BIRTH | BRGY. MASLUG, BAYBAY CITY, LEYTE | If holder of dual citizenship, please indicate the details. | | Pls. indicate of | | | ountry: | |
| 5. SEX | ✓ Male Female | | I | | | | PUROK 7 | |
| 6 CIVIL STATUS | ✓ Single | 17. RESIDENTIAL ADDRESS | N/A House/Block/Lot No. N/A Subdivision/Village | | | Street MASLUG Barangay | | |
| 7. HEIGHT (m) | 1.6 | | Subdivision/Village BAYBAY CITY | | LEYTE | | | |
| 8. WEIGHT (kg) | 73 | ZIP CODE | | ty/Municipality 6 | | Province 6521 | | |
| 9. BLOOD TYPE | N/A | 18. PERMANENT ADDRESS | Hou | N/A House/Block/Lot No. | | | PUROK 7 | |
| 10. GSIS ID NO. | N/A | | | N/A adivision/Village | | Street MASLUG Barangay | | |
| 11. PAG-IBIG ID NO. | BIG ID NO. N/A | | | BAYBAY ty/Municipality | | | LEYTE | |
| 12. PHILHEALTH NO. | N/A | ZIP CODE | - Ci | 6521 | | Province | | |
| 13. SSS NO. | N/A | 19. TELEPHONE NO. | | | | N/A | | |
| 14. TIN NO. | N/A | 20. MOBILE NO. | | 09551385624 | | | | |
| 15. AGENCY EMPLOYEE NO. N/A 2 | | 21. E-MAIL ADDRESS (if any) | | nanlingatong@gmail.com | | | | |
| II. FAMILY BACKGROUND | | | | | | | | |
| 22. SPOUSE'S SURNAME | N/A | T | 23. NAME of CHI | LDREN (Write | full name and I | ist all) | DATE OF BIR | ΓΗ (mm/dd/yyyy) |
| FIRST NAME | N/A | NAME EXTENSION (JR., SR) | | | | | | |
| MIDDLE NAME | N/A | | | | | | | |
| OCCUPATION | N/A | | | | | | | |
| EMPLOYER/BUSINESS NAME | N/A | | | | | | | |
| BUSINESS ADDRESS | N/A | | | | | | | |
| TELEPHONE NO. | N/A | | | | | | | |
| 24. FATHER'S SURNAME | LINGATONG | | | | | | | |
| FIRST NAME | ROLANDO | NAME EXTENSION (JR., SR) | | | | | | |
| MIDDLE NAME | DDLE NAME TIGBAWAN | | | | | | | |
| 25. MOTHER'S MAIDEN NAME | ER'S MAIDEN NAME | | | | | | | |
| SURNAME | RAMIREZ | | | | | | | |
| FIRST NAME | ZOSIMA | | | | | | | |
| MIDDLE NAME | JOSON | JOSON | | (Continue on separate sheet if necessary) | | | sary) | |
| III. EDUCATIONAL BACKGI | ROUND | | | | | | | |
| 26. LEVEL | NAME OF SCHOOL (Write in full) | BASIC EDUCATION/DEGRE (Write in full) | E/COURSE | PERIOD OF A | ATTENDANCE To | HIGHEST LEVEL/ UNITS EARNED (if not graduated) | YEAR GRADUATED | SCHOLARSHIP/ ACADEMIC HONORS RECEIVED |
| ELEMENTARY | MASLUG ELEMENTARY SCHOOL | PRIMARY EDUCATION | DN | 06/10/2008 | | GRADUATE | 2014 | N/A |
| SECONDARY | SECONDARY BITANHUAN NATIONAL HIGH SCHOOL | | SECONDARY EDUCATION 0 | | 04/062018 | GRADUATE | 2018 | N/A |
| VOCATIONAL / TRADE COURSE | PALERMO HOTEL INSTITUTE OF TOURISM AND HOSPITALITY INC | SENIOR HIGH SCHOOL | | 06/04/2018 | 04/03/2020 | GRADUATE | 2020 | WITH HONORS |
| COLLEGE | VISAYAS STATE UNIVERSITY | BACHELOR OF SECONDARY EDUCATION MAJOR IN ENGLISH | | 08/17/2020 | 05/08/2024 | GRADUATE | 2024 | CUM LAUDE |
| GRADUATE STUDIES | N/A N/A | | | | | | | |
| | (0 | L Continue on separate sheet if nece | essary) | | l | | L | l |
| SIGNATURE | 724 | | | DA | TE | | 07/18/2025 | |

| IV. CIVIL SERVICE ELIGIBILITY | | | | | | | | | |
|---|----------------------------|----------------------------|--------------------------|--------------------------|-------------------------|------------------|--|---|-------------------|
| | | RATING | DATE OF EXAMINATION / | PLACE OF EXAMINA | TION / CONFER | PMENT | LICENSE (if ap | | |
| SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE | | CONFERMENT | TEACE OF EXAMINA | TION / CON LI | AMILIN I | NUMBER | Date of Validity | | |
| LICENSURE EXAMINATION FOR PROFESSIONAL TEACHERS 85.0 | | 85.0 | 03/23/2025 | TACLO | BAN CITY | | 2339071 | 06/27/2028 | |
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| | XPERIENCE ate employmer | nt. Start from your recent | | | | l Work Expe | rience sheet. | | |
| 28. INCLU | JSIVE DATES m/dd/yyyy) | POSITION TI | TLE | DEPARTMENT / AGR | ENCY / OFFICE / COMPANY | MONTHLY | SALARY/ JOB/ PAY GRADE (if | STATUS OF | GOV'T |
| From | To | (Write in full/Do not a | | | /Do not abbreviate) | SALARY | applicable)& STEP (Format "00-0")/ INCREMENT | APPOINTMENT | SERVICE (Y/ N) |
| | 07/04/2025 | | | DEPARTMEN | IT OF EDUCATION | ₽ 13, 050 | N/A | CONTRACTUA | YES |
| | -110-11E0E0 | | | DEI MINIMEN | J. LEGOATION | . 10,000 | IV/A | L | 120 |
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| | | | | tinue on separate sheet | | | • | | |
| SIGNA | ATURE | | /4 | | DATE | | | 07/18/2025 CS FORM 212 (Revised 2017), Page 2 of 4 | |

| VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZ | | | | RGANIZATIOI | V/S | | | |
|---|---|---|------------------------------|-----------------|---|--|--|--|
| | NAME & ADDRESS OF ORGANIZATION INCLUSIVE DATES (Write in full) INCLUSIVE DATES (mm/dd/yyyy) | | | NUMBER OF HOURS | POSITION / NATURE OF WORK | | | |
| RITANHIJAN-MASI IIG FISHEREOI KS ASSOCIATION - RITANHIJAN BAYRAY | | From 12/04/2020 | То | | | | | |
| CITY, LEYTE | | | 07/01/2024 | | SECRETARY | | | |
| HUGPONG SA MGA MANANAGAT SA MASLUG - MASLUG, BAYBAY CITY, LEYTE | | | 12/01/2021 | | MEMBER | | | |
| BAYBAY WRITERS COLLECTIVE - VISCA, BAYBAY CITY, LEYTE | | | 05/08/2024 | | VICE PRESIDEN | NT | | |
| PHILIPPINE ASSOCIATION FOR TEACHERS AND EDUCATORS - QUEZON CITY | | | PRESENT | | MEMBER | | | |
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| | | | | | | | | |
| VII. LEARNING AND DEVELOPMENT (L&D) | | | sheet if necessary TENDED |) | | | | |
| 30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full) | | INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From To | | NUMBER OF HOURS | Type of LD (Managerial/ Supervisory/ Technical/etc) | CONDUCTED/ SPONSORED BY (Write in full) | | |
| 1ST PAUGBA SA ORMOC CREATIVE | WRITING WORKSHOP | 06/11/2023 | 06/11/2023 | 8.0 | FELLOW | ORMOC CITY LOCAL GOVERNMENT | | |
| 2023 BATHALAD-SUGBO CREATIVE N | VRITING WORKSHOP | 07/15/2023 | 07/16/2023 | 16.0 | FELLOW | BATHALAD - SUGBO | | |
| 2023 SUNDAY CLUB NATIONAL WR | ITERS WORKSHOP | 12/09/2024 | 12/10/2023 | 16.0 | FELLOW | | | |
| 23RD IYAS LA SALLE NATIONAL WE | RITERS' WORKSHOP | 06/16/2024 | 06/22/2024 | 40.0 | FELLOW | SUNDAY - CLUB | | |
| SUGILANON: FOLKLORE, MYTH, LEGEN | D WRITING WORKSHOP | 05/19/2025 | 05/23/2025 | 40.0 | STAFF | DE LA SALLE UNIVERSITY | | |
| | | | | | | ORMOC CITY LOCAL GOVERNMENT | | |
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| (Continue on separate sheet if necessary) VIII. OTHER INFORMATION | | | | | | | | |
| 31. SPECIAL SKILLS and HOBBIES | 32. NON | | NCTIONS / RECOG | NITION | | 33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION | | |
| | 32. (Write in full) PHILIPPINE ASSOCIATION FOR TE | | | | | | | |
| BREAD AND PRISTANCES NO HAIGH PER | | | | | AND EDUCATORS | | | |
| FOOD AND BEVERAGES NC II HOLDER | | | | | BAYBAY WRITERS COLLECTIVE | | | |
| FRONT OFFICE CERTICATE HOLDER | | | | | | | | |
| HOUSEKEEPING CERTIFICATE HOLDER | | | | | | | | |
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| | | finus a= | ahaat if | | | | | |
| SIGNATURE | (Con | unue on separate | sheet if necessary | | ATE | 07/18/2025 | | |
| | - / / | | | | | CC FORM 040 (Paying d 0047). Page 2 of 4 | | |

| 34. | Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediately 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 ☐ YES If YES, give detail | ✓ NO ✓ NO ls: | | | | | |
| 35. | 35. a. Have you ever been found guilty of any administrative offense? | | | | ☐ YES ☑ NO If YES, give details: | | | | | |
| b. Have you been criminally charged before any court? | | | | ☐ YES | | | | | | |
| 36. | 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. | 38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? | | | | ☐ YES | | | | | |
| | 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: | | | | | |
| 39. | Have you acquired the status of an immigrant or permane | ☐ 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 If YES, please specif ☐ YES If YES, please specif ☐ YES If YES, please specif | y ID No: | | | | | |
| 41. | REFERENCES (Person not related by consanguinity or affinity to applic | ant /appointee) | | | | | | | | |
| | NAME | ADDRESS | | TEL. NO. | | | | | | |
| DR. MARILYN N. MANAIG | | VISAYAS STATE UNIVERSITY | | 9196866636 | | | | | | |
| | MICHAEL CARLO C. VILLAS CARLITO B. MANTUA | VISAYAS STATE UNIVERSI ORMOC CITY | 11 | N/A 9606620492 | | | | | | |
| 42. | 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. 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: PRC ID/License/Passport No.: 2339071 Date/Place of Issuance: 07/08/2025 Date Accomplished | | | , | Right Thumbmark | | | | | | |
| SUBSCRIBED AND SWORN to before me this, affiant exhibiting, affiant exhibiting | | | | | government ID as indicated above. | | | | | |
| ı | Person Auministering Oati | | | | | | | | | |