

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	RIVERA		
FIRST NAME	JUANITO	NAME EXTENSION (JR., SR) JR.	
MIDDLE NAME	MANAGBANAG		
3. DATE OF BIRTH (mm/dd/yyyy)	03/11/1985	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	BRGY. PANGASUGAN BAYBAY, LEYTE	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:	17. RESIDENTIAL ADDRESS	N/A PUROK 3 House/Block/Lot No. Street N/A PANGASUGAN Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province ZIP CODE 6521-A
7. HEIGHT (m)	5'5		
8. WEIGHT (kg)	59 Kgs.		
9. BLOOD TYPE	O+	18. PERMANENT ADDRESS	N/A PUROK 3 House/Block/Lot No. Street N/A PANGASUGAN Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province ZIP CODE 6521-A
10. GSIS ID NO.	NONE		
11. PAG-IBIG ID NO.	1212-0406-2068		
12. PHILHEALTH NO.	13-000103526-7		
13. SSS NO.	N/A	19. TELEPHONE NO.	NONE
14. TIN NO.	400-441-569	20. MOBILE NO.	09515124953
15. AGENCY EMPLOYEE NO.	NONE	21. E-MAIL ADDRESS (if any)	juanito.rivera@vsu.edu.ph

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	NAME EXTENSION (JR., SR) 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	RIVERA			
FIRST NAME	JUANITO	NAME EXTENSION (JR., SR) SR.		
MIDDLE NAME	RAMOS			
25. MOTHER'S MAIDEN NAME				
SURNAME	MANAGBANAG			
FIRST NAME	NELLY			
MIDDLE NAME	SABJON			

(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	PANGASUGAN ELEMENTARY SCHOOL	N/A	1994	1999	N/A	1999	N/A
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	N/A	1999	2003	N/A	2003	N/A
VOCATIONAL / TRADE COURSE	TECHNICAL EDUCATION AND SKILLS DEVELOPMENT AUTHORITY	ELECTRICAL INSTALLATION & MAINTENANCE	2019	2019	N/A	2019	N/A
COLLEGE	BAYBAY INSTITUTE OF TECHNOLOGY	SEAMANSHIP	2033	2004	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE	DATE	6/13/20
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[illegible]

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE

DATE _____

Q | 13 | 23

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	
1. Training Program Title	
2. Training Program Description	
3. Training Program Dates	
4. Training Program Location	
5. Training Program Facilitator	
6. Training Program Sponsor	
7. Training Program Budget	
8. Training Program Evaluation	
9. Training Program Impact	
10. Training Program Lessons Learned	
11. Training Program Recommendations	
12. Training Program Status	
13. Training Program Contact Information	
14. Training Program Other Information	

[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)
	DRIVING		NONE		KABALIKAT
	GARDENING				
	CLEANING				
	LANDSCAPING				
	DOING ELECTRICAL INSTALLATION AND MAINTENANCE				
	CARPENTRY				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	6/13/22
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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: NONE

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
MILAGROS C. BALES	BRGY. PANGASUGAN, BAYBAY CITY, LEYTE	9424814524
HENRY Y. GOLTIANO	VISCA, BAYBAY CITY, LEYTE	9335112548
DILBERTO O. FERRAREN	VISCA, BAYBAY CITY, LEYTE	9751870633



PHOTO

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.

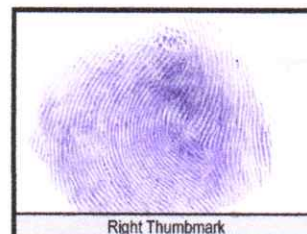
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: Driver's License

ID/License/Passport No.: H12-14-001622

Date/Place of Issuance: City of Baybay

Signature (Sign inside the box)
4/13/25
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