

PERSONAL DATA SHEET

WARNING: Any misinterpretation 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 FIRST NAME MIDDLE NAME	SACAY		
	DINDO		NAME EXTENSION (JR., SR)
	LONZAGA		
3. DATE OF BIRTH (mm/dd/yyyy)	4/16/1975	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.	<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	ORMOC CITY		
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 ZIP CODE	#621 Woodcrest Condo Don Quijada House/Block/Lot No. Street Woodcrest Residences Guadalupe Subdivision/Village Barangay Cebu Cebu City/Municipality Province 6000
7. HEIGHT (m)	1.75		
8. WEIGHT (kg)	65		
9. BLOOD TYPE	A+		
10. GSIS ID NO.	200 528 3436		
11. PAG-IBIG ID NO.	121 001 968 213		
12. PHILHEALTH NO.	19-089767909-8	18. PERMANENT ADDRESS ZIP CODE	# 621 Woodcrest Condo Don Quijada House/Block/Lot No. Street Woodcrest Guadalupe Subdivision/Village Barangay Cebu Cebu City/Municipality Province 6000
13. SSS NO.	06-1472746-5		
14. TIN NO.	178-628-059		
15. AGENCY EMPLOYEE NO.		19. TELEPHONE NO.	
		20. MOBILE NO.	+63 927 563 0104
		21. E-MAIL ADDRESS (if any)	dindosacay@yahoo.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME	N.A.		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
		NAME EXTENSION (JR., SR)		
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME FIRST NAME MIDDLE NAME	SACAY			
	OSCAR	NAME EXTENSION (JR., SR)		
	ESCOTON			
25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME	LUNZAGA			
	SACAY			
	EPIFANIA			
	DIANO			
(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	ORMOC CITY CENTRAL SCHOOL		1987	1989		1989	
SECONDARY	SAINT PETER'S COLLEGE OF ORMOC CITY		1989	1993		1993	
VOCATIONAL / TRADE COURSE							
COLLEGE	UNIV. OF SAN JOSE RECOLETOS	BS in CIVIL ENGINEERING	1995	1999		1999	DEAN'S LIST
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	Apr. 21, 2020	CS FORM 212 (Revised 2017), Page 1 of 4
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