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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. 1. CS ID No. (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes () duse separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. PUNA 2. SURNAME NAME EXTENSION (JR., SR) FIRST NAME NICOLS REY ACOJEDO MIDDLE NAME 3 DATE OF BIRTH 07/09/1998 16. CITIZENSHIP ✓ Filipino ☐ Dual Citizenship (mm/dd/vvvv) 4 PLACE OF BIRTH BAYBAY CITY, LEYTE If holder of dual citizenship. Pls. indicate country: please indicate the details. ☐ Female 5. SEX ✓ Male Philippines ☐ Married 17. RESIDENTIAL ADDRESS ✓ Single 6 CIVIL STATUS House/Block/Lot No ☐ Widowed ☐ Separated PANGASUGAN ☐ Other/s: Subdivision/Village Barangay BAYBAY CITY I FYTE 7. HEIGHT (m) 1 63 City/Municipality Province 65 ZIP CODE 6521 8. WEIGHT (kg) 18. PERMANENT ADDRESS TYPE A 9 BLOOD TYPE House/Block/Lot No Street PANGASUGAN 10. GSIS ID NO. N/A Subdivision/Village Barangay BAYBAY CITY LEYTE 11. PAG-IBIG ID NO. 121314766119 Citv/Municipality Province 12. PHILHEALTH NO. 13-025549620-5 ZIP CODE 6521 N/A 19 TELEPHONE NO N/A 13 SSS NO 14 TIN NO 620-056-212-00000 20. MOBILE NO. 09218321203 15. AGENCY EMPLOYEE NO. N/A punanicols@gmail.com 21. E-MAIL ADDRESS (if any) FAMILY BACKGROUND 22. SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) N/A N/A FIRST NAME MIDDLE NAME N/A N/A OCCUPATION EMPLOYER/BUSINESS NAME N/A N/A **BUSINESS ADDRESS** N/A TELEPHONE NO. 24. FATHER'S SURNAME **PUNA** NAME EXTENSION (JR., SR) REYNALDO FIRST NAME **GALVEZ** MIDDLE NAME 25. MOTHER'S MAIDEN NAME ACOJEDO SURNAME HELEN FIRST NAME **ROMANILLIOS** MIDDLE NAME (Continue on separate sheet if necessary) III. EDUCATIONAL BACKGROUND SCHOLARSHIP/ HIGHEST LEVEL 26. PERIOD OF ATTENDANCE BASIC EDUCATION/DEGREE/COURSE NAME OF SCHOOL YEAR ACADEMIC LEVEL GRADUATED (Write in full) (Write in full) HONORS (if not graduated) RECEIVED From То ELEMENTARY PANGASUGAN ELEMENTARY SCHOOL 2004 2010 2010 **BUNGA NATIONAL HIGHSCHOOL** 2014 SECONDARY 2010 2014 VOCATIONAL / N/A TRADE COURSE BACHELOR OF SCIENCE IN 3RD YEAR **VISAYAS STATE UNIVERSITY** 2014 AGRICULTURE MAJOR IN AGRONOMY COLLEGE GRADUATE STUDIES N/A rate sheet if necessary) SIGNATURE DATE June 27, 2024

NA	IV. CIVIL SE	ERVICE ELIG	BILITY							
NA	SPECIAL LAWS/ CES/ CSEE (If Applicable)				TION / CONFERMENT		LICENSE (if a			
Configuration Configuratio				(If Applicable)		TION / CONFERMENT		NUMBER	Date of Validity	
WORKERPERIENCE	N/A									
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Contractive							ea work Exp	SALARY/ JOB/ PAY		001#7
0810/2022 PRESENT	(mn	m/dd/yyyy)						applicable)& STEP (Format "00-0")/		SERVICE (Y/ N)
MINERALD MINERALD			SECURITY WAT	TCHMAN	VISAYAS S	P 12, 000		CONTRACTUAL	Y	
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMEN			T/PEOPLE/VOLUNTARY		ORGANIZATION/S			
29. NAME & ADDRESS OF ORGANIZATION			INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK		
	(Write in full)		From	To	Nombert of Flooric		TOUTHOUT HATOILE OF WORK	
N/A								
VII. LEA	ARNING AND DEVELOPMENT (L&D)		tinue on separate : PROGRAMS A		<u>)</u>	_		
	the most recent L&D/training program and inclu				hief/Executive/Mar	agerial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			(mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
Reclaimin	ng Personal Effectiveness: A Journey to Sel	f-Empowerment	From 05/28/2024	To 05/30/2024	24		VSU, Human Resource Management Office	
Snake Bit	e and Marine Aquatic Envenomation Semin	ar Workshop	02/28/2024		8		Phillippine Coast Guard Auxillary, Medical Specia	
	Support with CPR 2020 Guidelines with Al		02/26/2024	02/28/2024	24		Support Squadron and VSU Phillippine Coast Guard Auxillary, Medical Special	
	on and Bag Valve Mask Applications, Occu Norkshop on Barangay Development Plann		10/23/2018	10/25/2018	24		Support Squadron and VSU ISRDS, Visayas State University, Visca, Baybay	
		-					City, Leyte	
VIII. OT	HER INFORMATION	(Con	tinue on separate	sheet if necessary)		_	
31.	SPECIAL SKILLS and HOBBIES	32. NON-	ACADEMIC DISTIN	ICTIONS / RECOG e in full)	SNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
	DRIVING		N/A	l			N/A	
TECHN	NICAL SKILLS (MICROSOFT OFFICE)							
	COMMUNICATION SKILLS							
	WRITING							
	READING							
	COOKING							
		(Con	tinue on separate	sheet if necessary	·)		I	
	SIGNATURE	Marie Control			Di	ATE	June 27, 2024	

34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Care	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:				
35.	a. Have you ever been found guilty of any administrative offe	☐ YES ☑ NO If YES, give details:				
	b. Have you been criminally charged before any court?	☐ YES ☑ NO If YES, give details: Date Filed: Status of Case/s:				
36.	Have you ever been convicted of any crime or violation of arby any court or tribunal?	☐ YES ☑ NO If YES, give details:				
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, en 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 electron Barangay election)?	ction held within the last year (except	☐ YES ☑ NO If YES, give details:			
	b. Have you resigned from the government service during th election to promote/actively campaign for a national or local	☐ YES ☑ NO If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):				
a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES ☑ NO If YES, please specify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	t /appointee)				
	NAME	ADDRESS	TEL. NO.			
	DENNIS P. PEQUE	PANGASUGAN, BAYBAY CITY, LEYTE	9277062843			
	ROTACIO S. GRAVOSO	MARCOS, BAYBAY CITY, LEYTE	9335162864			
	DEXTER S. MAGAN	PANGASUGAN, BAYBAY CITY, LEYTE	9053804045			
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 filling of administrative/criminal case/s against me.						
<i>F</i>	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 D/License/Passport No.: H12-22-303325 Date/Place of Issuance: 12/29/2022 LTO, BAYBAY CITY	ox) Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.					
1		Person Administering Oat	II			