

## 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	MACUTO		
FIRST NAME	VIJIA FRANCESCA		NAME EXTENSION (JR., SR)
MIDDLE NAME	COBACHA		
3. DATE OF BIRTH (mm/dd/yyyy)	09/19/1992	16. CITIZENSHIP	
4. PLACE OF BIRTH	CEBU, CITY	If holder of dual citizenship, please indicate the details.	Pls. indicate country:
5. SEX	<input type="checkbox"/> Male <input checked="" 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 ZONE 1 House/Block/Lot No. Street N/A HIMO-AW Subdivision/Village Barangay HILONGOS LEYTE City/Municipality Province
7. HEIGHT (m)	1.65 m	ZIP CODE	6524
8. WEIGHT (kg)	74 kg		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	N/A ZONE 1 House/Block/Lot No. Street N/A HIMO-AW Subdivision/Village Barangay HILONGOS LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6524
11. PAG-IBIG ID NO.	121312661970		
12. PHILHEALTH NO.	12-253018356-2		
13. SSS NO.	34-9831569-2	19. TELEPHONE NO.	N/A
14. TIN NO.	381-912-414-00000	20. MOBILE NO.	0966-560-4877
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	vijiasca@gmail.com

## 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
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	MACUTO			
FIRST NAME	EDENEO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	NERI			
25. MOTHER'S MAIDEN NAME	COBACHA			
SURNAME	ALFONSA ALEXANDRA			
FIRST NAME	MACUTO			
MIDDLE NAME	COBACHA			

(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	GRELINA OSMENA CHRISTIAN COLLEGE	ELEMENTARY	06/22/2000	03/27/2005	N/A	2005	N/A
SECONDARY	GRELINA OSMENA CHRISTIAN COLLEGE	HIGHSCHOOL	06/27/2005	03/25/2009	N/A	2009	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF ANIMAL SCIENCE	07/08/2016	07/14/2022	N/A	2022	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE


DATE

9/7/23

[illegible]

## V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	9/7/23

ADDITIONAL WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

VI. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/ TRAINING PROGRAMS ATTENDED	
1. Name of the Program	
2. Duration	
3. Location	
4. Description of the Program	
5. Key Takeaways	
6. Impact on Performance	
7. Additional Comments	

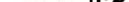
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(Continue on separate sheet if necessary)

## VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	DESIGN SKILLS		N/A		N/A
	SKETCH SKILLS				
	ENCODING SKILLS				
	TECHNICAL SKILLS				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	7/7/23
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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: \_\_\_\_\_

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

NAME	ADDRESS	TEL. NO.
JANE FRANCIS V. LOBEDICA	HILONGOS, LEYTE	9126020115
CATHERINE A. FABULAR	BATO, LEYTE	9260716761
ATTY. LEMUEL JAN N. NERVES	HILONGOS, LEYTE	9173237994

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: PHILSYS ID

ID/License/Passport No.: 6254-2957-4307-5204

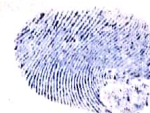
Date/Place of Issuance: 12 AUG 2021 HILONGOS, LEYTE

Signature (Sign inside the box)

Date Accomplished



VUIA JANE FRANCIS V. LOBEDICA C. MACUTO  
PHOTO



Right Thumbmark

SUBSCRIBED AND SWORN to before me this

9/7/23

at \_\_\_\_\_, applicant exhibiting his/her validly issued government ID as indicated above.

**ATTY. ROMMEL P. PUSA**  
PUBLIC ATTORNEY II  
PURSUANT TO RA NO. 9406  
Person Administering Oath