

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 No.

(Do not fill up. For CSC use only)

PERSONAL INFORMATION

2. SURNAME	PLENOZ		
FIRST NAME	REGINE	NAME EXTENSION (JR, SR)	
MIDDLE NAME	SABANATE		
3. DATE OF BIRTH (mm/dd/yyyy)	07/13/2000	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	SURIGAO DEL NORTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6. CIVIL STATUS	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	#4, C. A. House/Block/Lot No. Street T24 CH Subdivision/Village Urban ORMOG City/Municipality UTO Province
7. HEIGHT (m)	1.53	ZIP CODE	6541
8. WEIGHT (kg)	52	18. PERMANENT ADDRESS	#4, C. A. House/Block/Lot No. Street T24 CH Subdivision/Village Urban ORMOG City/Municipality UTO Province
9. BLOOD TYPE	O	ZIP CODE	6541
10. GSIS ID NO.		19. TELEPHONE NO.	
11. PAG-IBIG ID NO.	121303406089	20. MOBILE NO.	09922785960
12. PHILHEALTH NO.	13-202042872-7	21. E-MAIL ADDRESS (if any)	sabanateregine0@gmail.com
13. SSS NO.	06-4425755-8		
14. TIN NO.	612 298 929 000		
15. AGENCY EMPLOYEE NO.			

FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NAME EXTENSION (JR, SR)			
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	(ROD) PLENOZ			
FIRST NAME	ROD			
MIDDLE NAME	RAYO			
25. MOTHER'S MAIDEN NAME				
SURNAME	SABANATE			
FIRST NAME	RODOLYN			
MIDDLE NAME	RENE			
(Continue on separate sheet if necessary)				

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	COCON CENTRAL SCHOOL		2006	2012		2012	PAIT ACHIEVEMENT
SECONDARY	NEW ORMOG CITY NATIONAL HIGH SCHOOL	Accountancy and Business Management	2012	2018		2018	VITEH HONOR
VOCATIONAL / TRADE COURSE							
COLLEGE	WESTERN LETO COLLEGE OF ORMOG	BS in Business Administration	2018	2022		2022	ACADEMIC AWARD
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	03/29/23
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[illegible]

V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE

Revised 10/1/10

DATE _____

07/29/23

2

NAME & ADDRESS OF ORGANIZATION
(Write in full)

INCLUSIVE DATES
(continued)

NUMBER OF REPLYING

POSITION / NATURE OF REASON

119

Continue on separate sheet if necessary.

LEARNING AND DEVELOPMENT (L&D) INTERVENTION/TRAINING PROGRAMS ATTENDED

27

TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS
(Write in full)

INCLUSIVE DATES OF
ATTENDANCE
(mm/dd/yyyy)

NUMBER OF RECORDS

Type of LD
(Managerial/
Supervisory/
Technician/etc.)

CONDUCTED/SPONSORED BY
(Write in full)

- FOUND LEADERS for RESILIENCE PROGRAM.
- ENTERPRIZE DESIGN THINKING WORKSHOP
- TEAM BUILDING & STRATEGIC PLANNING SEMINARS
- ACCOUNTING for non-ACCOUNTANTS

09

12 hrs

LEARNING
TECHNIQUES

LOW ORMOC

09/10/22

Q. How

STRATEGIC

RURAL BANK OF OPMDC

04/2022

$$05 \mid 20$$

10 hrs

1

(PILPO) Philippine Institute of
Certified Public
Accountants

(Continue on separate sheet if necessary)

OTHER INFORMATION

1

SPECIAL SKILLS and HOBBIES

32

NON-ACADEMIC DISTINCTIONS / RECOGNITION
(Write in full)

MEMBERSHIP IN ASSOCIATION/ORGANIZATION
(Write in full)

CLIENT RELATIONSHIP BUILDING

PROCESS IMPROVEMENT

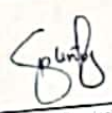
PROFICIENT in MICROSOFT
OFFICE

(Continue on separate sheet if necessary)

DATE _____

01-28-23

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<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>									
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>Status of Case/s: _____</p>									
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>									
<p>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?</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: <u>Resignation, looking for better opportunity</u></p>									
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>									
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>									
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>									
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant / appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>RAMIL RYAN TORREFIER</td> <td>BRGY. MARUEN, RMU 07</td> <td>0975128737</td> </tr> <tr> <td>VENICE MAUTISTA</td> <td>BRGY. LUGAS, MARIKINA</td> <td>0914921034</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	RAMIL RYAN TORREFIER	BRGY. MARUEN, RMU 07	0975128737	VENICE MAUTISTA	BRGY. LUGAS, MARIKINA	0914921034
NAME	ADDRESS	TEL. NO.								
RAMIL RYAN TORREFIER	BRGY. MARUEN, RMU 07	0975128737								
VENICE MAUTISTA	BRGY. LUGAS, MARIKINA	0914921034								
<p>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.</p>										
<p>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</p> <p>PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: _____</p> <p>ID/License/Passport No.: _____</p> <p>Date/Place of Issuance: _____</p>	<div style="border: 1px solid black; padding: 5px; text-align: center;">  Signature (Sign inside the box) <u>03-29-23</u> Date Accomplished </div>									
<p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; width: 100%; height: 50px; margin-top: 10px;"></div> <p style="text-align: center;">Person Administering Oath</p>										

ID picture taken within the last 6 months 4.5 cm. X 3.5 cm (passport size)

Computer generated or photocopied picture is not acceptable

PHOTO

Right Thumbmark