

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	MATURAN		
FIRST NAME	EARL GENE		NAME EXTENSION (JR., SR)
MIDDLE NAME	LAPAC		
3. DATE OF BIRTH (mm/dd/yyyy)	10/09/1999	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 CITY	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	LAPAC RESIDENCE OUR LADY OF LOURDES APARTMENT House/Block/Lot No. Street BERNADETTE VILLAGE BARANGAY LUNA Subdivision/Village Barangay SURIGAO CITY SURIGAO DEL NORTE City/Municipality Province
7. HEIGHT (m)	1.7	ZIP CODE	8400
8. WEIGHT (kg)	65		
9. BLOOD TYPE	AB	18. PERMANENT ADDRESS	LAPAC RESIDENCE OUR LADY OF LOURDES APARTMENT House/Block/Lot No. Street BERNADETTE VILLAGE BARANGAY LUNA Subdivision/Village Barangay SURIGAO CITY SURIGAO DEL NORTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	8400
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	18-250758412-9	19. TELEPHONE NO.	N/A
13. SSS NO.	N/A	20. MOBILE NO.	09693584196
14. TIN NO.	621-108-745-00000	21. E-MAIL ADDRESS (if any)	earlqmaturan@gmail.com
15. AGENCY EMPLOYEE NO.	N/A		

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	
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	MATURAN			
FIRST NAME	EUGENE	NAME EXTENSION (JR., SR)		
MIDDLE NAME	TAN			
25. MOTHER'S MAIDEN NAME	JESSIELYN BALLORI LAPAC			
SURNAME	MATURAN			
FIRST NAME	JESSIELYN			
MIDDLE NAME	LAPAC			

(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	SISON CENTRAL ELEMENTARY SCHOOL	BASIC EDUCATION	Year 2006	Year 2012	N/A	2012	Academic Awardee
SECONDARY	SAINT PAUL UNIVERSITY SURIGAO	BASIC EDUCATION	Year 2012	Year 2016	N/A	2016	Academic Awardee
VOCATIONAL / TRADE COURSE	SAINT PAUL UNIVERSITY SURIGAO	STEM	Year 2016	Year 2018	N/A	2018	Academic Awardee
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN NURSING	Year 2018	Year 2022	N/A	2022	Cum Laude
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

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

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)

<i>SIGNATURE</i>	
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<i>DATE</i>

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S						
29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK	
		From	To			
(Continue on separate sheet if necessary)						
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED						
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)						
30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
(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)	
(Continue on separate sheet if necessary)						
SIGNATURE				DATE		

<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> <hr/> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</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>Keene E. Eusala, RN, MAN</td> <td>Surigao City, SDN</td> <td>0950-594-1218</td> </tr> <tr> <td>Joel Rey U. Acob, RN, MSN, PhD</td> <td>Baybay City, Leyte</td> <td>0956-916-1146</td> </tr> <tr> <td>Lynn E. Escuyos, RN, MAN</td> <td>Surigao City, SDN</td> <td>0910-851-2291</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Keene E. Eusala, RN, MAN	Surigao City, SDN	0950-594-1218	Joel Rey U. Acob, RN, MSN, PhD	Baybay City, Leyte	0956-916-1146	Lynn E. Escuyos, RN, MAN	Surigao City, SDN	0910-851-2291
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<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>													
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<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="width: 60%;"> <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; height: 60px; margin-top: 10px; width: 100%;"></div> <div style="border: 1px solid black; height: 20px; margin-top: 5px; width: 100%; text-align: center;">Person Administering Oath</div> </div> <div style="width: 35%; text-align: center;">  <p style="font-size: small;">PHOTO</p> <div style="border: 1px solid black; height: 80px; margin-top: 10px; width: 100%;"></div> <div style="border: 1px solid black; height: 20px; margin-top: 5px; width: 100%; text-align: center;">Right Thumbmark</div> </div> </div>													