

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	CIRCULADO		
FIRST NAME	ALMERA	NAME EXTENSION (JR., SR)	NONE
MIDDLE NAME	DABALOS		
3. DATE OF BIRTH (mm/dd/yyyy)	23/03/1997	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	Baybay Leyte	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization 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	House/Block/Lot No. Street PANGASUGAN Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.52	ZIP CODE	6521-A
8. WEIGHT (kg)	46		
9. BLOOD TYPE		18. PERMANENT ADDRESS	House/Block/Lot No. Street PANGASUGAN Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
10. GSIS ID NO.		ZIP CODE	6521-A
11. PAG-IBIG ID NO.	1212-5850-8914		
12. PHILHEALTH NO.	13-252552205-2		
13. SSS NO.		19. TELEPHONE NO.	none
14. TIN NO.		20. MOBILE NO.	09264545386 ; 09510348334
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	almeracirculado97@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	NAME EXTENSION (JR., SR)		N/A	N/A
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	CIRCULADO			
FIRST NAME	GEORGE	NAME EXTENSION (JR., SR)		
MIDDLE NAME	SABADO			
25. MOTHER'S MAIDEN NAME				
SURNAME	DABALOS			
FIRST NAME	ROSALINA			
MIDDLE NAME	LAPARA			

(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	PANGASUGAN ELEM. SCHOOL		2004	2009		2009	3RD Honorable Mention
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL		2009	2013		2013	
VOCATIONAL / TRADE COURSE	NONE						
COLLEGE	VISAYAS STATE UNIVERSITY - MAIN CAMPUS	BS IN AGRICULTURE major in HORTICULTURE	2015	2019		2019	CHED
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	Nov. 25, 2023
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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]

SIGNATURE		DATE	Nov. 25, 2023
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[illegible]

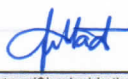
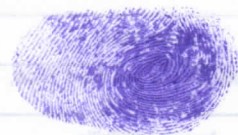
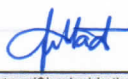
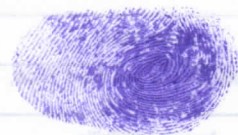
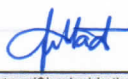
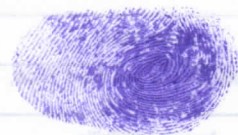
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

VII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Driving Skills		
Computer Literate (MS Word, Excel, Powerpoint)		
Agricultural Skills		
Self-directed (able to complete task with limited supervision)		
Hardworking (willing to be trained)		
Former Varsity in Badminton		

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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><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</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>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: _____</p> <p style="text-align: center;">resignation</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: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>Dr. Zenaida Gonzaga -VSU Professor, Dept of Horticulture</td> <td>VSU, VISCA Baybay City, Leyte</td> <td>(053) 563 - 7739</td> </tr> <tr> <td>Dr. Dennis P. Peque - VSU Professor, Dept of Forestry</td> <td>VSU, VISCA Baybay City, Leyte</td> <td>(053) 563 - 7552</td> </tr> <tr> <td>Hon. Dexter S. Magan - Brgy. Captain</td> <td>Pangasugan, Baybay City, Leyte</td> <td>9053804045</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Dr. Zenaida Gonzaga -VSU Professor, Dept of Horticulture	VSU, VISCA Baybay City, Leyte	(053) 563 - 7739	Dr. Dennis P. Peque - VSU Professor, Dept of Forestry	VSU, VISCA Baybay City, Leyte	(053) 563 - 7552	Hon. Dexter S. Magan - Brgy. Captain	Pangasugan, Baybay City, Leyte	9053804045
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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>													
<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: Driver's License</p> <p>ID/License/Passport No.: H12-19-001843</p> <p>Date/Place of Issuance: LTO - Baybay City, Leyte</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; padding: 10px;">  Signature (Sign inside the box) Nov. 25, 2023 Date Accomplished </td> <td style="text-align: center; padding: 10px;">  Right Thumbmark </td> </tr> </table>	 Signature (Sign inside the box) Nov. 25, 2023 Date Accomplished	 Right Thumbmark										
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<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: 200px; height: 40px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>													



Almera D. Circulado
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