

1. SURNAME FIRST NAME MIDDLE NAME	V E G A		
	J A M E S O N		
	P A N A L I G A N		
2. NAME EXTENSION (e.g. Jr., Sr.)			
3. DATE OF BIRTH (mm/dd/yyyy)		06/10/1994	
4. PLACE OF BIRTH		Sta, Cruz,Bongabong Oriental.Mindoro	
5. SEX		<input type="checkbox"/> Male <input type="checkbox"/> Female	
6. CIVIL STATUS		<input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Annulled <input type="checkbox"/> Others, specify _____	
7. CITIZENSHIP		Filipino	
8. HEIGHT (m)		5.4	
9. WEIGHT (kg)		70	
10. BLOOD TYPE		B	
11. PRESENT ADDRESS		BRGY.HIPUNGO,BAYBAY CITY,LEYTE	
12. ZIP CODE		6521	
13. TEL. NO./CEL. NO.		09125801582	
14. PHILHEALTH NO.		13-025293921-1	
15. TIN		484-589-773-00	
16. PAG-IBIG ID NO.			
17. SPOUSE'S SURNAME		Vega	
FIRST NAME		Maribeth	
MIDDLE NAME		Matugas	
18. NAME OF CHILD (Write full name and list all)		Jacob M. Vega	
DATE OF BIRTH (mm/dd/yyyy)		January 11 2014	
19. HIGHEST EDUCATIONAL ATTAINMENT <i>(Please check and underline the specific)</i>		[] Elementary (Grade _____ / Graduated) [] High School (1st, 2nd, 3rd, 4th, Graduated) [] College (1st, 2nd, 3rd, 4th, Graduated) Degree: _	
20. CAREER SERVICE ELIGIBILITY		<input type="checkbox"/> Professional <input type="checkbox"/> Sub-Professional <input type="checkbox"/> Others, Specify: _____	
21. WORK EXPERIENCE INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full)	
DEPARTMENT / AGENCY / OFFICE / COMPANY /PROJECT (Write in full)		SALARY (Daily or Monthly)	
STATUS OF APPOINTMENT (Perm/Temp/ Job Order)		GOV'T SERVICE (Yes / No)	
From		To	
04/01/2015		PRESENT	
ADMIN AIDE 1		VSU-SPMO	
22. SPECIAL SKILLS (i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)		Proficiency (Please check)	
Highly Skilled		Average	
Fair		REMARKS	
carpentry		/	
driving		/	
Plumbing		/	
23. RELEVANT TRAININGS SEMINAR/WORKSHOP ATTENDED (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)	
From		To	
NUMBER OF HOURS		CONDUCTED/ SPONSORED BY (Write in full)	
Reclaiming Personal Effectiveness: A Journey to Self Empowerment		5/28/24	
5/30/24		24	
Visayas State University			
Unlocking Excellence: The 5S Revolution for Clerks and Heads at Visayas State University		11/29/23	
11/29/23		8	
Visayas State University			
Hands-only Cardiopulmonary Resuscitation		07/21/2022	
07/22/2022		16	
Visayas State University			
ISO 9001:2015		08/30/2022	
08/31/2022		16	
Visayas State University			
ISO 9001:2015		09/13/2021	
09/13/2021		8	
Visayas State University			

IV. CIVIL SERVICE ELIGIBILITY

29. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE/ TESDA/NCC	RATING	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
				NUMBER	DATE OF RELEASE

(Continue on separate sheet if necessary)

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(Continue on separate sheet if necessary)

VI. SPECIAL SKILLS

31. SPECIAL SKILLS (i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)	Proficiency			
	Highly Skilled	Average	Fair	

(Continue on separate sheet if necessary)

VII. TRAINING PROGRAMS (Start from the most recent training.)

32. TITLE OF SEMINAR/CONFERENCE/WORKSHOP/SHORT COURSES (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	CONDUCTED/ SPONSORED BY (Write in full)
	From	To		
	/ /	/ /		
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(Continue on separate sheet if necessary)

36. Are you related by consanguinity or affinity to any of the following : a. Within the third degree with the appointing authority, recommending authority, chief of office/bureau/department or person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed?	<div><input type="checkbox"/> YES <input type="checkbox"/> NO</div> <div>If YES, give details: _____</div>	

(Continue on separate sheet if necessary)

VI. SPECIAL SKILLS				
22. SPECIAL SKILLS (i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)	Proficiency (Please check)			REMARKS
	Highly Skilled	Average	Fair	
VII. TRAINING PROGRAMS (Start from the most recent training.)				
23. TITLE OF SEMINAR/CONFERENCE/WORKSHOP/SHORT COURSES (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	CONDUCTED/ SPONSORED BY (Write in full)
	From	To		
24. Are you related by consanguinity or affinity to any of the following : a. Within the third degree with the appointing authority, recommending authority, chief of office/bureau/ department or person who has immediate supervision over you in the Office,Department/Project where you will be appointed?	<div style="text-align: center; margin-bottom: 10px;"> <input type="checkbox"/> YES <input type="checkbox"/> NO </div> If YES, give details: _____ _____ _____			
25. REFERENCES (Person not related by consanguinity or affinity to applicant / appointee)				
NAME	ADDRESS	TEL. NO.	<div style="border: 1px solid black; padding: 10px; margin: 0 auto; width: 80%;"> PLEASE PASTE an ID picture taken within the last 6 months (1"X1" or 2" x 2" or Passport Size) (REQUIRED) </div> <div style="text-align: center; margin-top: 10px;">PHOTO</div>	
26. I declare under oath that this Personal Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I also authorize the agency head / authorized representative to verify / validate the contents stated herein. I trust that this information shall remain confidential.				
COMMUNITY TAX CERTIFICATE NO.				
ISSUED AT	SIGNATURE (Sign inside the box)			
ISSUED ON (mm/dd/yyyy)	DATE ACCOMPLISHED			
			<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div> <div style="text-align: center; margin-top: 5px;">RIGHT THUMBMARK (REQUIRED)</div>	