

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 (☐ nd 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	JACOB		
FIRST NAME	LUCIANO	JR	
MIDDLE NAME	RODRIGUEZ		
3. DATE OF BIRTH (mm/dd/yyyy)	2/1/1978	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	BRGY. ANAKAN, GINGOOG CITY, MISAMIS ORIENTAL	If holder of dual citizenship, please indicate the details.	Philippines
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6 CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	Zone 6 House/Block/Lot No. GUADALUPE Subdivision/Village BARANGAY BAYBAY LEYTE City/Municipality Province 6521
7. HEIGHT (m)	1.80		
8. WEIGHT (kg)	75	ZIP CODE	
9. BLOOD TYPE	'O'	18. PERMANENT ADDRESS	ZONE 6 House/Block/Lot No. Street GUADALUPE Subdivision/Village BARANGAY BAYBAY LEYTE City/Municipality Province 6521
10. GSIS ID NO.	NONE		
11. PAG-IBIG ID NO.	1212-974-3827		
12. PHILHEALTH NO.	13-025228136-4	ZIP CODE	
13. SSS NO.	NONE	19. TELEPHONE NO.	(053)-563-8627
14. TIN NO.	607-840-913	20. MOBILE NO.	09533502893
15. AGENCY EMPLOYEE NO.	NONE	21. E-MAIL ADDRESS (if any)	junjacobe02@gmail.com

II. FAMILY BACKGROUND


22. SPOUSE'S SURNAME	JACOB		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	JOVELYN		BRETT YVONNE G. JACOB	4/6/2011
MIDDLE NAME	GOFREDO			
OCCUPATION	SCIENCE RESEARCH ASSISTANT			
EMPLOYER/BUSINESS NAME	VSU			
BUSINESS ADDRESS	BARANGAY PANGASUGAN, BAYBAY CITY, LEYTE			
TELEPHONE NO.	9533502893			
24. FATHER'S SURNAME	JACOB			
FIRST NAME	LUCIANO	SR.		
MIDDLE NAME	TULAYTAY			
25. MOTHER'S MAIDEN NAME	RODRIGUEZ			
SURNAME	JACOB			
FIRST NAME	SARAH			
MIDDLE NAME	TUTO		(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	ANAKAN ELEMENTARY SCHOOL	Primary Education	1986	1992	Certificate	1992	N/A
SECONDARY	MALIBUD NATINAL HIGH SCHOOL	High School	1992	1996	Diploma	1996	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	UNIVERSITY OF MINDANAO	BACHELOR OF SCIENCE IN CRIMINOLOGY	1999	2004	Diploma	2004	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	July 2, 2024
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IV. CIVIL SERVICE ELIGIBILITY								
27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)		
						NUMBER	Date of Validity	
BARANGAY OFFICIAL ELIGIBILITY				7/25/2014		220110140254		
(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.								
28.	INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0") INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
	From	To						
	9/1/2023	Present	Utility	VSU Hospital	506/day		Job Order	Yes
	11/1/2021	8/31/2023	Watchman	VSU Hospital	506/day		Job Order	Yes
	10/1/2020	12/31/2020	Emergency Labor	NARC-VSU	500/day		Job Order	Yes
	5/1/2007	5/31/2010	Brgy. Councilor	Brgy. Tagpako, Gingoog City, Misamis Or.	10,000/mo.		Elected	Yes
	3/1/2005	12/31/2006	Laboratory Aide	Secura Plant Genetics Corp. Misamis Or.	8,000/mo.		Contractual	No
(Continue on separate sheet if necessary)								
SIGNATURE					DATE	July 2, 2024		

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

[illegible]

(Continue on separate sheet if necessary)

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

[illegible]

(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)
Driving	NONE	None
Computer Literate		

(Continue on separate sheet if necessary)

<i>(Signature an separate sheet if necessary)</i>			
SIGNATURE		DATE	July 2, 2024

<p>34. Are you related by consanguinity or affinity to the appointing or recommending chief of bureau or office or to the person who has immediate supervision over you in 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 style="text-align: right;">If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p style="text-align: right;">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</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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>ELWIN JAY YU</td> <td>VSU, HOSPITAL</td> <td></td> </tr> <tr> <td>LUZ O. MORENO</td> <td>NARC, VSU</td> <td>9164239381</td> </tr> <tr> <td>ALLEN LAMBERT</td> <td>OP, VSU</td> <td></td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	ELWIN JAY YU	VSU, HOSPITAL		LUZ O. MORENO	NARC, VSU	9164239381	ALLEN LAMBERT	OP, VSU		
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LUZ O. MORENO	NARC, VSU	9164239381												
ALLEN LAMBERT	OP, VSU													
<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>														
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> <td style="padding: 2px;">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td style="padding: 2px;">Government Issued ID:</td> <td style="padding: 2px;">DRIVER'S LICENSE</td> </tr> <tr> <td style="padding: 2px;">ID/License/Passport No.:</td> <td style="padding: 2px;">H-12-18-000809</td> </tr> <tr> <td style="padding: 2px;">Date/Place of Issuance:</td> <td style="padding: 2px;">BAYBAY CITY, LEYTE</td> </tr> </table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)	PLEASE INDICATE ID Number and Date of Issuance	Government Issued ID:	DRIVER'S LICENSE	ID/License/Passport No.:	H-12-18-000809	Date/Place of Issuance:	BAYBAY CITY, LEYTE	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 100px; text-align: center; vertical-align: middle;"> </td> </tr> <tr> <td style="padding: 2px;">Signature (Sign inside the box)</td> </tr> <tr> <td style="padding: 2px;">July 2, 2024</td> </tr> <tr> <td style="padding: 2px;">Date Accomplished</td> </tr> </table>		Signature (Sign inside the box)	July 2, 2024	Date Accomplished	<div style="text-align: center;"> <p>PHOTO</p> </div> <div style="border: 1px solid black; height: 100px; margin-top: 10px;"></div> <div style="text-align: center; margin-top: 5px;"> <p>Right Thumbmark</p> </div>
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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; margin: 10px auto; height: 30px; text-align: center; line-height: 30px;"> <p>Person Administering Oath</p> </div>														