

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	PATONONA			
FIRST NAME	JOAN	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	RALLOS			
3. DATE OF BIRTH (mm/dd/yyyy)	12/14/1997	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	Pangasugan, Baybay, Leyte	If holder of dual citizenship, please indicate the details.		
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	603 PUROK 2 House/Block/Lot No. Street Subdivision/Village PANGASUGAN Barangay BAYBAY LEYTE City/Municipality Province 6521	
7. HEIGHT (m)	1.52	18. PERMANENT ADDRESS	603 PUROK 2 House/Block/Lot No. Street N/A PANGASUGAN Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province 6521	
8. WEIGHT (kg)	52		ZIP CODE	
9. BLOOD TYPE	O			
10. GSIS ID NO.	N/A			
11. PAG-IBIG ID NO.	121297222429	ZIP CODE		
12. PHILHEALTH NO.	03-250891706-5			
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A	
14. TIN NO.	765-259-124-000	20. MOBILE NO.	09073116158	
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	patononajoan@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	N/A	NAME EXTENSION (JR., SR)	N/A	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	N/A			
FIRST NAME	N/A	NAME EXTENSION (JR., SR)		
MIDDLE NAME	N/A			
25. MOTHER'S MAIDEN NAME	ANITA RALLOS PATONONA			
SURNAME	PATONONA			
FIRST NAME	ANITA			
MIDDLE NAME	RALLOS		(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 ELEMENTARY SCHOOL	PRIMARY	06/06/2004	3/26/2010	N/A	2010	VALEDICTORIAN
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	HIGHSCHOOL	6/14/2010	4/27/2014	N/A	2014	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRICULTURE	06/02/2014	2/15/2018	N/A	2018	N/A
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/05/2024
-----------	--	------	------------

[illegible]

#### IV. 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	11/05/2024
-----------	---	------	------------



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		
N/A		N/A	N/A	N/A	N/A

(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			
	SHAPING CULTURE: EMBRACING VALUES FOR PRODUCTIVE WORKPLACE PERFORMANCE	05/15/2024	05/15/2024	4.0	LECTURE	VISAYAS STATE UNIVERSITY
	PROFESSIONAL LECTURE SERIES WITH PROF. LADISLAV KOKOSKA	03/13/2024	03/13/2024		LECTURE	VISAYAS STATE UNIVERSITY
	HRIS SOFTWARE ONBOARDING	12/06/2023	12/06/2023	8.0	LECTURE	VISAYAS STATE UNIVERSITY
	UNLOCKING EXCELLENCE: THE 5S REVOLUTION FOR CLERKS AND HEADS AT VISAYAS STATE UNIVERSITY	11/29/2023	11/29/2023	4.0	LECTURE	VISAYAS STATE UNIVERSITY
	MENTAL HEALTH AWARENESS SEMINAR	04/25/2023	04/25/2023	3.0	LECTURE	VISAYAS STATE UNIVERSITY
	ISO 9001.2015 AWARENESS AND RE-AWARENESS SEMINAR	08/29/2023	08/29/2023	3.0	LECTURE	VISAYAS STATE UNIVERSITY
	MANDATORY ORIENTATION AND REORIENTATION OF ACADEMIC ADVISERS, DEP. ENROLLMENT FOCAL PERSONS	08/25/2022	08/25/2022	8.0	LECTURE	VISAYAS STATE UNIVERSITY
	VIRTUAL AWARENESS SEMINAR ON R.A. NO. 11032	06/28/2022	06/28/2022	8.0	LECTURE	VISAYAS STATE UNIVERSITY
	ISO AWARENESS AND REAWARENESS	08/30/2022	08/30/2022	3.0	LECTURE	VISAYAS STATE UNIVERSITY
	AWARENESS WEBINAR ON DATA PRIVACY ACT OF 2012	04/07/2022	04/07/2022	8.0	LECTURE	VISAYAS STATE UNIVERSITY
	LIKA USAP TAYOI EFFECTIVE HUMAN COMUNICATION AND HUMAN RELATIONS	6/20/2021	6/20/2021	3.0	e-LEARNING	AGRICULTURAL TRAINING INSTITUTE

(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)
	computer skills		N/A		N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/05/2024
-----------	---	------	------------

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,

a. within the third degree?

b. within the fourth degree (for Local Government Unit - Career Employees)?

☐ YES

☒ NO

☐ YES

☒ NO

If YES, give details:

35. a. Have you ever been found guilty of any administrative offense?

b. Have you been criminally charged before any court?

☐ YES

☒ NO

If YES, give details:

☐ YES

☒ NO

If YES, give details:

Date Filed:

Status of Case/s:

36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?

☐ YES

☒ NO

If YES, give details:

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?

☒ YES

☐ NO

If YES, give details:

FINISHED CONTRACT

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?

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?

☐ YES

☒ NO

If YES, give details:

☐ YES

☒ NO

If YES, give details:

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES

☒ NO

If YES, give details (country):

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:

Are you a member of any indigenous group?

Are you a person with disability?

Are you a solo parent?

☐ YES

☒ NO

If YES, please specify:

☐ YES

☒ NO

If YES, please specify ID No:

☐ YES

☒ NO

If YES, please specify ID No:

11. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
MIRIAM M. DE LA TORRE	BAYBAY CITY, LEYTE	63535650600 local 1067
HOMER LOIS P. NAPOLES	GABAS, BAYBAY CITY, LEYET	63535650600 local 1137
CHRISTAN MIKHAEL D. RESTOR	VISCA, BAYBAY CITY, LEYTE	63535650600 local 1066

12. 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.

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  
PLEASE INDICATE ID Number and Date of Issuance


Government Issued ID: Phil ID

ID/License/Passport No.: 4356-3952-3814-6871

Date/Place of Issuance: 12/29/2023, BAYBAY CITY, LEYTE

Signature (Sign inside the box)

Date Accomplished



JOAN R. PATAGONA

PHOTO

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath

CS FORM 212 (Revised 2017), Page 4 of 4