

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.

CS ID No.

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	CABALO		
FIRST NAME	MARK JAY		NAME EXTENSION (JR., SR.)
MIDDLE NAME	DAYOHA		
3. DATE OF BIRTH (mm/dd/yyyy)	05/18/1995	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	HILONGOS, LEYTE	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	N/A R.V. VILLAFLORES House/Block/Lot No. Street N/A WESTERN Subdivision/Village Barangay HILONGOS LEYTE City/Municipality Province ZIP CODE 6524
7. HEIGHT (m)	1.57	18. PERMANENT ADDRESS	N/A R.V. VILLAFLORES House/Block/Lot No. Street N/A WESTERN Subdivision/Village Barangay HILONGOS LEYTE City/Municipality Province ZIP CODE 6524
8. WEIGHT (kg)	56	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	N/A	20. MOBILE NO.	09481928862
10. GS/ID NO.	N/A	21. E-MAIL ADDRESS (if any)	markjay.cabalod@gmail.com
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	132028456178		
13. SSS NO.	0646968358		
14. TIN NO.	N/A		
15. AGENCY EMPLOYEE NO.	N/A		

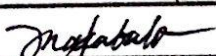
II. FAMILY BACKGROUND

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	N/A
MIDDLE NAME	N/A		N/A	N/A
OCCUPATION	N/A		N/A	N/A
EMPLOYER/BUSINESS NAME	N/A		N/A	N/A
BUSINESS ADDRESS	N/A		N/A	N/A
TELEPHONE NO.	N/A		N/A	N/A
24. FATHER'S SURNAME	CABALO			
FIRST NAME	FELIPE	NAME EXTENSION (JR., SR.)		
MIDDLE NAME	RIFE			
25. MOTHER'S MAIDEN NAME				
SURNAME	DAYOHA			
FIRST NAME	PETRONIA			
MIDDLE NAME	N/A			

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	KANG-IRAS ELEMENTARY SCHOOL	ELEMENTARY	2004	2012	N/A	2012	3RD HONOR
SECONDARY	HILONGOS NATIONAL VOCATIONAL SCHOOL	SENIOR HIGH SCHOOL	2014	2018	N/A	2018	WITH HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY IN MATHEMATICS	2018	2022	N/A	2022	CHED SCHOLAR
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	12/20/2023
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[illegible]

10. *Journal of the American Statistical Association*, 1997, 92, 1023-1032.

[illegible]

(Continue on separate sheet if necessary)		
SIGNATURE	<i>M. Kabala</i>	DATE 12 25 / 20 / 2023

14. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATIONS

[illegible]

(Continue on separate sheet if necessary)

VI. 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)
COOKING	N/A	PHILIPPINE ASSOCIATION FOR TEACHERS AND EDUCATORS
RUNNING EXERCISE		

(Continue on separate sheet if necessary)

SIGNATURE	<i>Indalato</i>	DATE	12/20/2023
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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? ☐ YES ☒ NO

b. within the fourth degree (for Local Government Unit - Career Employees)? ☐ YES ☒ NO

If YES, give details: _____

35. a. Have you ever been found guilty of any administrative offense? ☐ YES ☒ NO

If YES, give details: _____

b. Have you been criminally charged before any court? ☐ 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: _____

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? ☐ YES ☒ NO

If YES, give details: _____

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: _____

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:

a. Are you a member of any indigenous group? ☐ YES ☒ NO

If YES, please specify: _____

b. Are you a person with disability? ☐ YES ☒ NO

If YES, please specify ID No: _____

c. Are you a solo parent? ☐ YES ☒ NO

If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)		
NAME	ADDRESS	TEL. NO.
ROYIE C. ROCAMORA	CEBU CITY	N/A
MA. TEREYA T. PADILLA	HILONGOS, LEYTE	N/A

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.



MARK JAY D. CABALO

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)

PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: **PRC**

ID/License/Passport No: **2112504**

Date/Place of Issuance: **09/10/2023, CEBU CITY**

Signature (Sign inside the box)

Mark Jay D. Cabalo

12/20/2023

Date Accomplished

Right Thumbmark

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

Person Administering Oath