

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	ASIS		
FIRST NAME	JUDY MAE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	GILSANO		
3. DATE OF BIRTH (mm/dd/yyyy)	09/07/2000	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	TAM-IS, MAASIN CITY, SOUTHERN 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:		
7. HEIGHT (m)	149	17. RESIDENTIAL ADDRESS	PUROK CAIMITO House/Block/Lot No. Street TAM-IS Subdivision/Village Barangay MAASIN SOUTHERN LEYTE City/Municipality Province
8. WEIGHT (kg)	42	ZIP CODE	
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	PUROK CAIMITO House/Block/Lot No. Street TAM-IS Subdivision/Village Barangay MAASIN SOUTHERN LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6600
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	N/A		
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A
14. TIN NO.	N/A	20. MOBILE NO.	09352694347/09380736073
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	asisjudymae07@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	ASIS			
FIRST NAME	CONRADO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	CAWALING			
25. MOTHER'S MAIDEN NAME	MARIA VASQUEZ GILSANO			
SURNAME	GILSANO			
FIRST NAME	MARIA			
MIDDLE NAME	VASQUEZ		(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	LIBHU ELEMENTARY SCHOOL	PRIMARY EDUCATION	2006	2013		2012	VALEDECTORI AN
SECONDARY	LIBHU NATIONAL HIGH SCHOOL	JUNIOR HIGH	2013	2017		2017	WITH HONOR

	MAASIN CITY NATIONAL HIGH SCHOOL	SENIOR HIGH	2017	2019		2019	FIRST HONORABLE MENTION
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A		N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY- MAIN CAMPUS	BACHELOR OF SCIENCE IN BIOLOGY- ECOLOGY	2019	2023		2023	DOST /MAGNA CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A		N/A	N/A
(Continue on separate sheet if necessary)							
SIGNATURE			DATE		JANUARY 12, 2024		

IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(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.

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	JANUARY 12, 2024
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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		
	ORGANIZATION OF BIOLOGY STUDENTS, DEPARTMENT OF BIOLOGICAL SCIENCES, VSU, BAYBAY, LEYTE	09/20/2022	09/25/2023	N/A	ORGANIZATION'S SECRETARY
		09/10/2021	08/20/2022	N/A	ORGANIZATION'S SECRETARY
	PHILIPPINE RED CROSS- SOUTHERN LEYTE CHAPTER, ABGAO, MAASIN CITY, SOUTHERN LEYTE	10/31/2020	PRESENT	N/A	SOUTHERN LEYTE CHAPTER BOARD OF DIRECTOR(2020-PRESENT)
		12/03/2021	PRESENT	N/A	NATIONAL TRAINER
		05/31/2015	PRESENT	N/A	YOUTH INSTRUCTOR
		10/31/2020	11/30/2023	N/A	CHAPTER YOUTH COUNCIL PRESIDENT
		10/25/2018	10/03/2020	N/A	CHAPTER YOUTH COUNCIL SECRETARY

(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)
COMPUTER LITERATE (EXCEL, WORD, PRESENTATION)	FIRST HONORABLE MENTION IN THE WHOLE VISAYAS (NATIONAL TRAINER)	PHILIPPINE RED CROSS
YOUTH INSTRUCTOR	ONE OF THE MOST OUTSTANDING PARTNER FOR THE CITY YOUTH DEVELOPMENT COUNCIL AS PRESIDENT OF RED CROSS YOUTH	CITY YOUTH DEVELOPMENT COUNCIL
CONDUCT FIELD WORK	OUTSTANDING RED CROSS YOUTH VOLUNTEER IN SOUTHERN LEYTE	

COMMUNICATION (VERBAL AND WRITTEN)	MEMBER BOARD OF DIRECTOR (PHILIPPINE RED CROSS- SOUTHERN LEYTE CHAPTER)		
LEADERSHIP			
ADAPTABILITY			
BASIC QGIS MAPPING			
(Continue on separate sheet if necessary)			
SIGNATURE		DATE	JANUARY 12, 2024

<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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p style="text-align: right;">If YES, give details: _____</p>															
<p>35. a. Have you ever been found guilty of any administrative offense? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p style="text-align: right;">If YES, give details: _____</p> <p>b. Have you been criminally charged before any court? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p style="text-align: right;">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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p style="text-align: right;">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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p style="text-align: right;">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)? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p style="text-align: right;">If YES, give details: _____</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? <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 style="text-align: right;">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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p style="text-align: right;">If YES, please specify: _____</p> <p>b. Are you a person with disability? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p style="text-align: right;">If YES, please specify ID No: _____</p> <p>c. Are you a solo parent? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p style="text-align: right;">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>JONAS P. MACO</td> <td>MAHAYAHAY, MAASIN CITY, SOUTHERN LEYTE</td> <td>9171204718</td> </tr> <tr> <td>HONEYLENE V. ONGY</td> <td>BAYBAY CITY, LEYTE</td> <td>9983470816</td> </tr> <tr> <td>DONNA G. VALIDA</td> <td>BAYBAY CITY, LEYTE</td> <td>9207126869</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	JONAS P. MACO	MAHAYAHAY, MAASIN CITY, SOUTHERN LEYTE	9171204718	HONEYLENE V. ONGY	BAYBAY CITY, LEYTE	9983470816	DONNA G. VALIDA	BAYBAY CITY, LEYTE	9207126869		
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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>		 PHOTO													
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SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath