

PERSONAL DATA SHEET

WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal cases against the person concerned.

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

Fill 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 use only)

I. PERSONAL INFORMATION

2. SURNAME	MARINAY		
FIRST NAME	ALFE MAE ANN		NAME EXTENSION (JR., SR.) N/A
MIDDLE NAME	EVANGELISTA		
3. DATE OF BIRTH (mm/dd/yyyy)	05/04/1998	16. CITIZENSHIP	☒ Filipino ☐ Dual Citizenship ☐ By birth ☐ By naturalization Pls. indicate country: PHILIPPINES
4. PLACE OF BIRTH	WLPH, BAYBAY CITY	If holder of dual citizenship, please indicate the details.	
5. SEX	☐ Male ☒ Female		
6. CIVIL STATUS	☒ Single ☐ Married ☐ Widowed ☐ Other/s:	17. RESIDENTIAL ADDRESS	N/A House/Block/Lot No. N/A Subdivision/Village BAYBAY City/Municipality LEYTE Province
7. HEIGHT (m)	1.52	ZIP CODE	6521
8. WEIGHT (kg)	39		
9. BLOOD TYPE	-	18. PERMANENT ADDRESS	N/A House/Block/Lot No. N/A Subdivision/Village BAYBAY City/Municipality LEYTE Province
10. GSIS ID NO.	N/A	ZIP CODE	6521
11. PAG-IBIG ID NO.	121230824441	19. TELEPHONE NO.	N/A
12. PHILHEALTH NO.	132503652165	20. MOBILE NO.	09514644645
13. SSS NO.	0641492996	21. E-MAIL ADDRESS (if any)	alfemaeannmarinay@gmail.com
14. TIN NO.	730-905-353		
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	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	MARINAY		"	"
FIRST NAME	ALBERTO	NAME EXTENSION (JR., SR.) SR.	"	"
MIDDLE NAME	SABUCIDO	"		"
25. MOTHER'S MAIDEN NAME			"	"
SURNAME	EVANGELISTA		"	"
FIRST NAME	MA. FE		"	"
MIDDLE NAME	BALATE			

(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/ AWARDS/ HONORS RECEIVED
			From	To			
ELEMENTARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION & GAAS ELEMENTARY SCHOOL	GRADE 1 TO GRADE 4; GRADE 5 TO GRADE 6	2004	2010	N/A	2010	1ST HONORABLE MENTION
SECONDARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION	FIRST YEAR TO FOURTH YEAR HIGH SCHOOL	2010	2014	N/A	2014	SALVATORIAN; EXCELLENCE IN SCIENCE AWARDS
VOCATIONAL / TRADE COURSE	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION	BARTENDING	2016	2016	NATIONAL CERTIFICATE II	N/A	N/A
COLLEGE	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION	BACHELOR OF SCIENCE IN BUSINESS ADMINISTRATION	2014	2018	N/A	2018	ACADEMIC SCHOLARSHIP
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	December 04, 2020
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[illegible]

V WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

Chiny

December 04, 2020

[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)
Computer Literate (MS Word, MS Excel, MS Powerpoint)	N/A	N/A
Mathematical skills		
Analytical & Organizational skills		
Multi-Tasking		
Time Management		
Playing Chess & Dama		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	December 04, 2020
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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?

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?

☐ 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.
Marlon G. Burlas	Unit Head, Motorpool Services, PPO-VSU, Visca Baybay City	09176341520
Mano Lilio P. Valenzona	Director, Physical Plant Office VSU, Visca Baybay City	09176341514
Jerson J. Colocar	OTMO Head, LGU Baybay City, Leute	0963910637

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.

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

PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: Tax Identification Number

ID/License/Passport No.: 730-905-353

Date/Place of Issuance: BIR, Ormoc City

Signature (Sign inside the box)

December 04, 2020

Date Accomplished



SUBSCRIBED AND SWORN to before me this DEC 04 2020, affiant exhibiting his/her validly issued government ID as indicated above.

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ATTY. EDEN B. CHAVEZ-BUTAWAN
Notary Public for the Province of Leyte, City of Baybay
N.C. No. B-19-01-04, February 5, 2019
Until December 31, 2020
R. Magaway Avenue, Baybay City, Leyte
Person Administering Oath