

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 THIS PDS FORM.

Print legibly. Use indelible blue or black ink and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE.

(Do not fill up for CSC use only)

1. SURNAME MANILA		NAME EXTENSION (Jr., Sr.)	
FIRST NAME RANIE			
MIDDLE NAME ORIAZ			
3. DATE OF BIRTH (mm/dd/yyyy)	04/08/1984	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization P/s, indicate country
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citizenship, please indicate the details	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6. MARITAL 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	
7. HEIGHT (m)	1.5M	House/Block/Lot No. Street CANDADAM	
8. WEIGHT (kg)	58KG	Subdivision/Village Barangay BAYBAY LEYTE	
9. BLOOD TYPE	O+	City/Municipality Province BAYBAY LEYTE	
10. USSS ID NO.	N/A	18. PERMANENT ADDRESS	
11. PAG-IBIG ID NO.	N/A	House/Block/Lot No. Street CANDADAM	
12. PHILHEALTH ID NO.	12-050611241-4	Subdivision/Village Barangay BAYBAY LEYTE	
13. SSS NO.	0639443122	City/Municipality Province BAYBAY LEYTE	
14. TIN NO.	240942535	ZIP CODE 6521	
15. AGENCY EMPLOYEE NO.		19. TELEPHONE NO.	09096204816
		20. MOBILE NO.	ranie.manila1984@gmail.com
		21. E-MAIL ADDRESS (if any)	

22. SPOUSE'S SURNAME		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NAME EXTENSION (Jr., Sr.)		
MIDDLE NAME			
OCCUPATION			
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME	MANILA		
FIRST NAME	RONALDO	NAME EXTENSION (Jr., Sr.)	
MIDDLE NAME	BENIGA		
25. MOTHER'S MAIDEN NAME			
SURNAME	ORIAZ		
FIRST NAME	EDITHA		
MIDDLE NAME	MURILLO		

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	BAYBAY SOUTH CENTRAL SCHOOL	PRIMARY EDUCATION	6/3/1996	3/20/1997	GRADUATED	1997	N/A
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	HIGH SCHOOL	6/5/1997	3/20/2001	GRADUATED	2001	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 AGRIBUSINESS	6/5/2001	4/5/2005	GRADUATED	2005	N/A
	ST MICHAEL COLLEGE	DIPLOMA IN SECONDARY EDUCATION	6/5/2017	3/18/2018	COMPLETED	2018	N/A

SIGNATURE	DATE	3/30/22
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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]


[illegible]

<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?</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 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> <p>Date Filed: _____</p> <p>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>If YES, give details:</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>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 answer the following items:</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 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>JULIETA T. DENDEN</td> <td>BAYBAY CITY, LEYTE</td> <td>09952766566</td> </tr> <tr> <td>MONINA ARRADAZA</td> <td>BAYBAY CITY, LEYTE</td> <td>09317200142</td> </tr> <tr> <td>MA.MELINDA NUNEZ</td> <td>BAYBAY CITY, LEYTE</td> <td>09055515013</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	JULIETA T. DENDEN	BAYBAY CITY, LEYTE	09952766566	MONINA ARRADAZA	BAYBAY CITY, LEYTE	09317200142	MA.MELINDA NUNEZ	BAYBAY CITY, LEYTE	09055515013
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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>													
<p>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</p> <p>PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: UMID</p> <p>ID/License/Passport No.: 0006-2540104-2</p> <p>Date/Place of Issuance: CEBU CITY</p>	<p>Signature (Sign inside the box)</p> <p><i>[Signature]</i></p> <p>Date Accomplished: 19-10-2022</p>												
<p>SUBSCRIBED AND SWORN to before me this <u>MAR 30 2022</u>, affiant exhibiting his/her validly issued government ID as indicated above.</p>													
<p>BOOK NO. 153</p> <p>PAGE NO. 2</p> <p>BOOK NO. 11</p> <p>SERIES OF 2012</p>	<p>ATTY. JEFFREY I. DE GUZMAN</p> <p>JUR. IN TCHNPHY</p> <p>PURSUANT TO R.A. 9406</p> <p>Person Administering Oath</p>												



RANIE O. MANLA

PHOTO



Right Thumbmark