

# 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 be separate sheet if necessary. Indicate N/A if not applicable. **DO NOT ABBREVIATE.**

1. CSID No.

(Do not fill up. For CSC use only)

## I. PERSONAL INFORMATION

2. SURNAME	NICASIO		
FIRST NAME	LINGATONG	NAME EXTENSION (JR., SR)	
MIDDLE NAME	DILIG		
3. DATE OF BIRTH (mm/dd/yyyy)	6/2/88	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	Maslug, Baybay City	If holder of dual citizenship, please indicate the details.	Philippines
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	17. RESIDENTIAL ADDRESS	KILBOURNE DRIVE
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	House/Block/Lot No.	Street
7. HEIGHT (m)	1.72	Subdivision/Village	MARCOS
8. WEIGHT (kg)	84	BAYBAY	LEYTE
9. BLOOD TYPE	O	City/Municipality	Province
10. GSIS ID NO.	NONE	ZIP CODE	6521
11. PAG-IBIG ID NO.	1212-0554-5011	18. PERMANENT ADDRESS	House/Block/Lot No.
12. PHILHEALTH NO.	13-025153411	Subdivision/Village	MARCOS
13. SSS NO.	NONE	BAYBAY	LEYTE
14. TIN NO.	335-822-267	City/Municipality	Province
15. AGENCY EMPLOYEE NO.		ZIP CODE	6521
		19. TELEPHONE NO.	
		20. MOBILE NO.	+63 948-492-8252
		21. E-MAIL ADDRESS (if any)	agenttoppo133@gmail.com

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	LINGATONG	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	JENETTE	JENICA MAY LINGATONG	October 29, 2006
MIDDLE NAME	PALOMA	NICK ELGIENE LINGATONG	March 15, 2009
OCCUPATION	HOUSE KEEPER	JAMAICA MAY LINGATONG	November 20, 2012
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME	LINGATONG		
FIRST NAME	REYMUNDO		
MIDDLE NAME	LORDAN		
25. MOTHER'S MAIDEN NAME			
SURNAME	DILIG		
FIRST NAME	JOVITA		
MIDDLE NAME	HANDAYAN		

(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	MASLUG ELEMENTARY SCHOOL	NOT APPLICABLE	1995	2002		2002	NONE
SECONDARY	ALTERNATIVE LEARNING SYSTEM BAYBAY	NOT APPLICABLE	2014	2014		2014	NONE
VOCATIONAL / TRADE COURSE	NONE	NOT APPLICABLE	NOT APPLICABLE				
COLLEGE	NONE	NOT APPLICABLE	NOT APPLICABLE				
GRADUATE STUDIES	NONE	NOT APPLICABLE	NOT APPLICABLE				

(Continue on separate sheet if necessary)

SIGNATURE	DATE	1/13/24
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[illegible]

**V. 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	1/13/24
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## VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

## VII. LEARNING AND DEVELOPMENT (L&amp;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)
Carpentry		
Chain Saw Operator		
Grass Cutter Operator		
Painter		
Basketball Player		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/13/24
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<p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or chief of bureau or office or to the person who has immediate supervision over you in the 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>	<div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> YES</div> <div><input checked="" type="checkbox"/> NO</div> </div> <div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> YES</div> <div><input checked="" type="checkbox"/> NO</div> </div> <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>	<div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> YES</div> <div><input checked="" type="checkbox"/> NO</div> </div> <div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> YES</div> <div><input checked="" type="checkbox"/> NO</div> </div> <p>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?</p>	<div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> YES</div> <div><input checked="" type="checkbox"/> NO</div> </div> <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>	<div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> YES</div> <div><input checked="" type="checkbox"/> NO</div> </div> <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>	<div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> YES</div> <div><input checked="" type="checkbox"/> NO</div> </div> <p>If YES, give details: _____</p> <div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> YES</div> <div><input checked="" type="checkbox"/> NO</div> </div> <p>If YES, give details: _____</p>														
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> YES</div> <div><input checked="" type="checkbox"/> NO</div> </div> <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</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>	<div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> YES</div> <div><input checked="" type="checkbox"/> NO</div> </div> <p>If YES, please specify: _____</p> <div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> YES</div> <div><input checked="" type="checkbox"/> NO</div> </div> <p>If YES, please specify ID No: _____</p> <div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> YES</div> <div><input checked="" type="checkbox"/> NO</div> </div> <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: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>DR. JOSE L. BACUSMO</td> <td>Santa Cruz, Baybay City, Leyte, Philippines</td> <td>0968 690 6880</td> </tr> <tr> <td>PROF. ROSA OPHELIA VELARDE</td> <td>Visca, Baybay City, Leyte</td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	DR. JOSE L. BACUSMO	Santa Cruz, Baybay City, Leyte, Philippines	0968 690 6880	PROF. ROSA OPHELIA VELARDE	Visca, Baybay City, Leyte						
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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>															
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<p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; width: 200px; margin: 10px auto; padding: 5px; text-align: center;"> <p>Person Administering Oath</p> </div>															