

4. 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: _____

5. 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: _____

6. 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: _____

7. 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: RESIGNATION

8. 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: _____

9. 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:

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

If YES, please specify: _____

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

If YES, please specify ID No: _____

3. 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.
NOL LAURENCE ARIZA	JARO, LEYTE	09182353294
JASON S. POPE	JARO, LEYTE	0946574822
RENIE BUSQUE	BOY BOY CITY	09553372819

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: PAICSYS ID

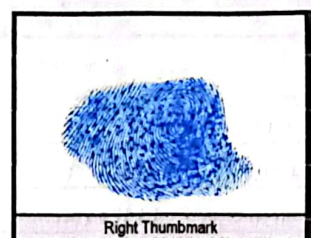
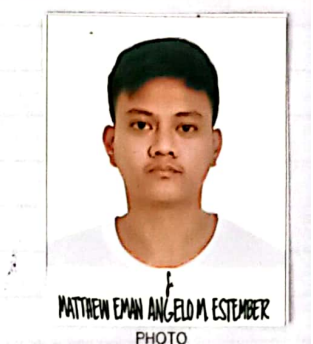
ID/License/Passport No.: 5068-9720-479-3571

Date/Place of Issuance: 06/07/2022

Signature (Sign inside the box)

10/27/23

Date Accomplished



SUBSCRIBED AND SWORN to before me this

OCT 27 2023

at _____, Philippines, in the presence of _____, and _____, all of whom are duly sworn, and who are duly qualified to administer the oath, and who are duly qualified to administer the oath, and who are duly qualified to administer the oath.

Doc No. 204
Page No. 42
Book No. #
Series of W03

NOTARY PUBLIC - JARO, LEYTE

NC NO. 2022-11-18, and License No. _____

ROLL OF ATTORNEYS NO. 84789/10/20, 2022

PS No. 25000/December 14, 2022/Leyte Chapter

Per No. 25000/December 14, 2022/Leyte Chapter

Person Administering Oath

MCLE Compliance No. _____, dated on May 20, 2022

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	ESTEMBER		
FIRST NAME	MATTHEW EMAN ANGEL		NAME EXTENSION (JR., SR.) N/A
MIDDLE NAME	MIGUEL		
3. DATE OF BIRTH (mm/dd/yyyy)	04/25/2000	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	TACLOBAN CITY	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 House/Block/Lot No. N/A Subdivision/Village Jaro City/Municipality PELU Street III Barangay LEYTE Province
7. HEIGHT (m)	1.66	ZIP CODE	6527
8. WEIGHT (kg)	67.3	18. PERMANENT ADDRESS	N/A House/Block/Lot No. N/A Subdivision/Village Jaro City/Municipality PELU Street III Barangay LEYTE Province
9. BLOOD TYPE	O+	ZIP CODE	6527
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	121304813157	20. MOBILE NO.	09272919323
12. PHILHEALTH NO.	13-250557266-6	21. E-MAIL ADDRESS (if any)	matthew.estember25@gmail.com
13. SSS NO.	06-4451360-7		
14. TIN NO.	623-259-486		
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	ESTEMBER			
FIRST NAME	PABEN	NAME EXTENSION (JR., SR.) N/A		
MIDDLE NAME	PABE			
25. MOTHER'S MAIDEN NAME				
SURNAME	MIGUEL			
FIRST NAME	AMANDA			
MIDDLE NAME	BADIUNGAN			

(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	JARO I CENTRAL SCHOOL	ELEMENTARY	2006	2012	GRADUATED	2012	N/A
SECONDARY	NOTRE DAME OF JARO	SENIOR HIGH SCHOOL	2012	2018	GRADUATED	2018	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	PALAMPAN INSTITUTE OF TECHNOLOGY	BACHELOR OF SCIENCE IN ASPIRATION MANAGEMENT	2018	2022	GRADUATED	2022	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE	DATE	10/26/2023
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION

[illegible]

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

(Continue on separate sheet if necessary)

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
COMPUTER LITERATE	N/A	N/A
FORMING AND LAYOUT	N/A	N/A
MICROSOFT LITERATE	N/A	N/A
DRIVING	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	10/24/2013
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[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE	<i>[Signature]</i>	DATE	10/28/23
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