

# 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	PATONONA		
FIRST NAME	REX	NAME EXTENSION (JR., SR)	
MIDDLE NAME	MARANGUIT		
3. DATE OF BIRTH (mm/dd/yyyy)	08/05/1981	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	BAYBAY CITY, LEYTE	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	House/Block/Lot No. _____ Street _____ Subdivision/Village _____ PANGASUGAN BAYBAY CITY _____ Barangay _____ City/Municipality _____ LEYTE Province _____ ZIP CODE 6521
7. HEIGHT (m)	1.651	18. PERMANENT ADDRESS	House/Block/Lot No. _____ Street _____ Subdivision/Village _____ PANGASUGAN BAYBAY CITY _____ Barangay _____ City/Municipality _____ LEYTE Province _____ ZIP CODE 6521
8. WEIGHT (kg)	65	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	A+	20. MOBILE NO.	N/A
10. GSIS ID NO.	2006416565	21. E-MAIL ADDRESS (if any)	rexpatonona1@gmail.com
11. PAG-IBIG ID NO.	1212-0504-2687		
12. PHILHEALTH NO.	13-000103507-0		
13. SSS NO.	N/A		
14. TIN NO.	943-262-609		
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
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	PATONONA			
FIRST NAME	CONSTANCIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	RALLOS			
25. MOTHER'S MAIDEN NAME				
SURNAME	MARANGUIT			
FIRST NAME	VERONICA			
MIDDLE NAME	ESPENOSA			

(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	PANGASUGAN ELEMENTARY SCHOOL	ELEMENTARY EDUCATION	1987	1992	GRADUATED	1993	N/A
SECONDARY	BUNGA NATIONAL HIGH SCHOOL	SECONDARY EDUCATION	1993	1996	GRADUATED	1997	N/A
VOCATIONAL / TRADE COURSE	TECHNICAL EDUCATION AND SKILLS DEVELOPMENT AUTHORITY	NC II ORGANIC AGRICULTURE PRODUCTION	2021	2021		2021	N/A
COLLEGE	LEYTE STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRICULTURAL EDUCATION	1998	1999	46 UNITS	N/A	N/A
GRADUATE STUDIES	N/A	N/A			N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	07-31-28
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[illegible]

## V. WORK EXPERIENCE

[illegible]

**SIGNATURE**

DATE \_\_\_\_\_

07-31-25



## 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&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)
EXCELLENT TIME MANAGEMENT SKILLS	N/A	N/A
OPERATING BINDERY EQUIPMENT		
EXCELLENT BINDERY OPERATION SKILLS		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	07-31-25
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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?  
  
b. Have you been criminally charged before any court?

☐ YES ☒ NO  
If YES, give details: \_\_\_\_\_  
  
☐ 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)?  
  
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: \_\_\_\_\_  
  
☐ 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?  
b. Are you a person with disability?  
c. Are you a solo parent?

☐ YES ☒ NO  
If YES, please specify: \_\_\_\_\_  
  
☐ YES ☒ NO  
If YES, please specify ID No: \_\_\_\_\_  
  
☐ YES ☒ NO  
If YES, please specify ID No: \_\_\_\_\_

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
ANDRELI PARDALES	BAYBAY CITY	9176745008
MARIEL L. GARRIDO	USA	9991057669
PAMELA PAGALAN	ORMOC CITY	9263680284


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: \_\_\_\_\_

ID/License/Passport No.: \_\_\_\_\_

Date/Place of Issuance: \_\_\_\_\_

  
Signature (Sign inside the box)

08-31-25  
Date Accomplished

  
  
 Right Thumbmark

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

Person Administering Oath