

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	ROMO			
FIRST NAME	ANAROSE	NAME EXTENSION (JR., SR)		
MIDDLE NAME	BAÑOC			
3. DATE OF BIRTH (mm/dd/yyyy)	03/28/2000	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship	
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citizenship, please indicate the details.	<input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		Pls. indicate country:	
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	Philippines ▼	
7. HEIGHT (m)	1.56	ZIP CODE	N/A	
8. WEIGHT (kg)	45		House/Block/Lot No.	Street
9. BLOOD TYPE	N/A		N/A	GAKAT
10. GSIS ID NO.	N/A		Subdivision/Village	Barangay
11. PAG-IBIG ID NO.	121307900358		BAYBAY	LEYTE
12. PHILHEALTH NO.	13-025622939-1	ZIP CODE	6521	
13. SSS NO.	06-4487061-2	18. PERMANENT ADDRESS	N/A	
14. TIN NO.	613-726-997-00000	ZIP CODE	House/Block/Lot No.	Street
15. AGENCY EMPLOYEE NO.	VJO02111		N/A	GAKAT
			Subdivision/Village	Barangay
			BAYBAY	LEYTE
			City/Municipality	Province
		ZIP CODE	6521	
		19. TELEPHONE NO.	N/A	
		20. MOBILE NO.	09510453611	
		21. E-MAIL ADDRESS (if any)	anaroseromo@gmail.com	

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		NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	ROMO			
FIRST NAME	ANANIAS	NAME EXTENSION (JR., SR)		
MIDDLE NAME	WENCESLAO	N/A		
25. MOTHER'S MAIDEN NAME				
SURNAME	BAÑOC			
FIRST NAME	ROSITA			
MIDDLE NAME	SAMBERE		(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	GAKAT ELEMENTARY SCHOOL	ELEMENTARY	2006	2012	N/A	2012	VALEDICTORIAN
SECONDARY	BAYBAY CITY SENIOR HIGH SCHOOL	SENIOR HIGH SCHOOL	2016	2018	N/A	2018	WITH HONORS
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	2018	2022	N/A	2022	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	05/02/2024
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

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

30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	WORKSHOP ON PROGRAM ACCREDITATION	01/12/2024	01/12/2024	8	INSTRUCTION	VISAYAS STATE UNIVERSITY
	DESIGN THINKING WORKSHOP	12/13/2023	12/14/2023	16.0	INSTRUCTION	LIMITLESS LAB
	HRIS SOFTWARE ONBOARDING	12/6/2023	12/6/2023	8.0	INSTRUCTION	VISAYAS STATE UNIVERSITY
	UNLOCKING EXCELLENCE: THE 5S REVOLUTION FOR CLERKS AND HEADS	11/29/2023	11/29/2023	8.0	INSTRUCTION	VISAYAS STATE UNIVERSITY
	ISO 9001:2015 ISO AWARENESS/RE AWARENESS SEMINAR	08/29/2023	08/29/2023	8.0	INSTRUCTION	VISAYAS STATE UNIVERSITY

(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 LITERACY (MICROSOFT WORD, EXCEL, POWERPOINT		N/A		N/A
	DRIVING				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	05/02/2024
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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.
RITCHIE M. DAPAR	BAYBAY CITY, LEYTE	0955 863 2403
MARIA LILIA VEGA	BAYBAY CITY, LEYTE	0961 760 5332
GIDEON NIEL D. TAN	BAYBAY CITY, LEYTE	0908 988 1069

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.

PHOTO

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: DRIVER'S LICENSE

ID/License/Passport No.: H12-19-002303

Date/Place of Issuance: BAYBAY CITY, LEYTE

afnarose/romo

Signature (Sign inside the box)

05/02/2024

Date Accomplished

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

Person Administering Oath

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