

# 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	CABAL			
FIRST NAME	JOHN LOUISE		NAME EXTENSION (JR., SR)	
MIDDLE NAME	ROSALES			
3. DATE OF BIRTH (mm/dd/yyyy)	09/22/1998	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	INOPACAN, 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:			
7. HEIGHT (m)	1.56	17. RESIDENTIAL ADDRESS	SAN ANTONIO	
8. WEIGHT (kg)	75		House/Block/Lot No.	Street
9. BLOOD TYPE			POBLACION	Barangay
10. GSIS ID NO.			INOPACAN	LEYTE
11. PAG-IBIG ID NO.		ZIP CODE	6522	
12. PHILHEALTH NO.		18. PERMANENT ADDRESS	SAN ANTONIO	
13. SSS NO.			House/Block/Lot No.	Street
14. TIN NO.	771841652000		POBLACION	Barangay
15. AGENCY EMPLOYEE NO.	N/A		INOPACAN	LEYTE
16. CITIZENSHIP		ZIP CODE	6522	
17. RESIDENTIAL ADDRESS		19. TELEPHONE NO.	N/A	
18. PERMANENT ADDRESS		20. MOBILE NO.	+639611414733	
19. TELEPHONE NO.		21. E-MAIL ADDRESS (if any)	<a href="mailto:jlcabal38@gmail.com">jlcabal38@gmail.com</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	CABAL			02/08/1972
FIRST NAME	DOMINIQUE	NAME EXTENSION (JR., SR)		
MIDDLE NAME	ABREA			
25. MOTHER'S MAIDEN NAME				
SURNAME	ROSALES			
FIRST NAME	JUDITH			12/21/1969
MIDDLE NAME	CARABALLE		(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 MENTOR
			From	To			
ELEMENTARY	INOPACAN CENTRAL SCHOOL	BASIC EDUCATION (ELEMENTARY)	2005	2011		2011	4TH HONORABLE MENTION
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	BASIC EDUCATION (HIGH SCHOOL)	2011	2015		2015	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 CHEMISTRY	2015	2020		2020	DOST
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	February 20, 2023
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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.

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(Continue on separate sheet if necessary)									
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<b>SIGNATURE</b>		<b>DATE</b>	February 20, 2023
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February 20, 2023

## 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	
1. Name of the Intervention/Program	
2. Description of the Intervention/Program	
3. Date Attended	
4. Duration	
5. Location	
6. Facilitator(s)	
7. Participants	
8. Objectives	
9. Key Takeaways	
10. Action Items	
11. Feedback	
12. Other Comments	

[illegible]

(Continue on separate sheet if necessary)

#### VIII. OTHER INFORMATION

[illegible]

*(Continue on separate sheet if necessary)*

SIGNATURE		DATE	February 20, 2023
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<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, <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO)?</p> <p style="text-align: right;"><input type="checkbox"/> YES <input checked="" 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 style="text-align: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>b. Have you been criminally charged before any court?</p> <p style="text-align: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p style="text-align: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>	<p>If YES, give details: _____</p> <p>If YES, give details: Date Filed: _____ 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 style="text-align: right;"><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: resignation, retirement, dropped from the rolls, dismissal, termination, <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO or of term, <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO out (abolition) in the public or private sector?</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>If YES, give details: _____</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>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>If YES, please specify: _____</p> <p>If YES, please specify ID 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>RONALD ARLET P. VILLABER</td> <td>BAYBAY CITY, LEYTE</td> <td>(+1) 234-863-0617</td> </tr> <tr> <td>MARIA ROBELYN A. INSIK</td> <td>BAYBAY CITY, LEYTE</td> <td>9630502057</td> </tr> <tr> <td>JAILENN JANNARAIN S. PURAY</td> <td>ORMOC CITY, LEYTE</td> <td>9124475153</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	RONALD ARLET P. VILLABER	BAYBAY CITY, LEYTE	(+1) 234-863-0617	MARIA ROBELYN A. INSIK	BAYBAY CITY, LEYTE	9630502057	JAILENN JANNARAIN S. PURAY	ORMOC CITY, LEYTE	9124475153
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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.) <b>PLEASE INDICATE ID Number and Date of Issuance</b></p> <p>Government Issued ID: <b>PRC License</b></p> <p>ID/License/Passport No.: <b>0003756</b></p> <p>Date/Place of Issuance: <b>10/21/2019</b></p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; height: 50px; vertical-align: middle;"> </td> </tr> <tr> <td style="text-align: center;"> <p>Signature (Sign inside the box)</p> <p><b>February 20, 2023</b></p> <p>Date Accomplished</p> </td> </tr> </table>		<p>Signature (Sign inside the box)</p> <p><b>February 20, 2023</b></p> <p>Date Accomplished</p>	<div style="text-align: center;">         PHOTO     </div> <div style="text-align: center; margin-top: 20px;">         Right Thumbmark     </div>									
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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: 300px; height: 60px; margin: 10px auto; text-align: center; line-height: 60px;">       Person Administering Oath     </div>													