

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	ROBRIDO		
FIRST NAME	LORRAINE MAE	NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	DIONGZON		
3. DATE OF BIRTH (mm/dd/yyyy)	12/1/2001	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	PALO, LEYTE		
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female If holder of dual citizenship, please indicate the details.		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	N/A House/Block/Lot No. ZONE 7 Subdivision/Village PALO City/Municipality
7. HEIGHT (m)	1.63 m.		N/A Street SAN JOAQUIN Barangay LEYTE Province
8. WEIGHT (kg)	63 kg.	ZIP CODE	
9. BLOOD TYPE	"O"	18. PERMANENT ADDRESS	N/A House/Block/Lot No. ZONE 7 Subdivision/Village PALO City/Municipality
10. GSIS ID NO.	N/A		N/A Street SAN JOAQUIN Barangay LEYTE Province
11. PAG-IBIG ID NO.	N/A	ZIP CODE	6501
12. PHILHEALTH NO.	13-250803564-4	19. TELEPHONE NO.	N/A
13. SSS NO.	N/A	20. MOBILE NO.	09617304722
14. TIN NO.	N/A	21. E-MAIL ADDRESS (if any)	lorrainemaerobrido12@gmail.com
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		NAME EXTENSION (JR., SR)	N/A	
MIDDLE NAME				
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	ROBRIDO			
FIRST NAME	JOSE	NAME EXTENSION (JR., SR)	N/A	
MIDDLE NAME	ABUDA			
25. MOTHER'S MAIDEN NAME				
SURNAME	DIONGZON			
FIRST NAME	ALTHEA REBECCA			
MIDDLE NAME	DILOY			

(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	SAN JOAQUIN CENTRAL SCHOOL	ELEMENTARY	2007	2013	GRADUATE	2013	4TH
SECONDARY	ST. THERESE EDUCATIONAL NFOUNDATION OF TACLOBAN INC.	JUNIOR HIGH SCHOOL	2013	2017	GRADUATE	2017	WITH HIGH HONOR
	SAINT PAUL SCHOOL OF PROFESSIONAL SCHOOL	SENIOR HIGH SCHOOL	2017	2019	GRADUATE	2019	WITH HIGH HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	SAINT PAUL SCHOOL OF PROFESSIONAL SCHOOL	BACHELOR OF SCIENCE IN ACCOUNTANCY	2019	2023	GRADUATE	2023	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	8/3/2025
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IV. CIVIL SERVICE ELIGIBILITY						
27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	CAREER SERVICE PROFESSIONAL EXAM	83.95%	08/20/2022	TACLOBAN CITY	N/A	N/A
	LICENSURE EXAMINATION FOR CERTIFIED PUBLIC ACCOUNTANTS (LECPA)	78.83%	08/25/2025 - 08/27/2025	TACLOBAN CITY	0213003	1/12/2028

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	<i>Insabide</i>	DATE	8/3/2025
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[illegible]

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

(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)
Proficient in Microsoft Excel, Word, & Powerpoint		
Attention to Detail and Accuracy		
Financial Reporting and Analysis		
Playing Logic Games or Sudoku		
Journaling or Writing Reflections		

(Continue on separate sheet if necessary)			
SIGNATURE	<i>Imrich</i>	DATE	8/3/2025

<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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><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>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>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><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 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>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</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><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</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><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</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><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> 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: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>FE BAGANES</td> <td>OPONG TOLOSA, LEYTE</td> <td>09163411176</td> </tr> <tr> <td>SARAH G. DELLERA</td> <td>SAN JOAQUIN PALO, LEYTE</td> <td>09494246724</td> </tr> <tr> <td>LIBERATO G. COBACHA</td> <td>CAVITE EAST PALO, LEYTE</td> <td>09499660152</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	FE BAGANES	OPONG TOLOSA, LEYTE	09163411176	SARAH G. DELLERA	SAN JOAQUIN PALO, LEYTE	09494246724	LIBERATO G. COBACHA	CAVITE EAST PALO, LEYTE	09499660152
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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 <u>04</u> day of <u>AUGUST</u>, 2025, at <u>TACLOBAN CITY, LEYTE</u>, affiant exhibiting his/her valid government ID as indicated above.</p> <p style="text-align: center;"> </p> <p style="text-align: center;"> ATTY. GARBETTE JOANNE B. REPOSA NOTARY PUBLIC for Tacloban City and Leyte NC No. 2025-01-19 Until Dec 31, 2026 Montejo St., Brgy. Sta. Cruz Palo, Leyte Roll No. 72338/ June 14, 2019 IBP No. 479916 / December 1, 2024 Person Administering Oath: 13341/ January 02, 2025/ Palo, Leyte MCLE No. VIII-0009126 / June 3, 2024 / Pasig City </p>													