

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	BERSABAL		
FIRST NAME	BRYAN DHELL		NAME EXTENSION (JR., SR)
MIDDLE NAME	BELTRAN		
3. DATE OF BIRTH (mm/dd/yyyy)	10/2/1999	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	HILONGOS, LEYTE	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input checked="" type="checkbox"/> Male <input 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"/> Other/s:	17. RESIDENTIAL ADDRESS	N/A
7. HEIGHT (m)	1.7	ZIP CODE	House/Block/Lot No. N/A
8. WEIGHT (kg)	65		Street N/A
9. BLOOD TYPE	N/A		Subdivision/Village N/A
10. GSIS ID NO.	N/A		Barangay LIBERTY
11. PAG-IBIG ID NO.	121297480895	18. PERMANENT ADDRESS	City/Municipality HILONGOS
12. PHILHEALTH NO.	13-252835605-6	ZIP CODE	Province LEYTE
13. SSS NO.	35-1923268-3		House/Block/Lot No. N/A
14. TIN NO.	509-760-398-000		Street N/A
15. AGENCY EMPLOYEE NO.	N/A		Subdivision/Village N/A
19. TELEPHONE NO.	N/A	Barangay LIBERTY	
20. MOBILE NO.	09109429253	City/Municipality HILONGOS	
21. E-MAIL ADDRESS (if any)	dhellbersabal@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	N/A	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	N/A	N/A		
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	BERSABAL			
FIRST NAME	MANUEL	NAME EXTENSION (JR., SR)		
MIDDLE NAME	TUMIMBO	N/A		
25. MOTHER'S MAIDEN NAME				
SURNAME	BELTRAN			
FIRST NAME	MARY ANN			
MIDDLE NAME	PANTONI			

(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	LIBERTY ELEMENTARY SCHOOL	ELEMENTARY	2011	2012	GRADUATE	2012	N/A
SECONDARY	THE SISTERS OF MARY SCHOOL - BOYSTOWN	SENIOR HIGH SCHOOL	2012	2016	GRADUATE	2016	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	MLG COLLEGE OF LEARNING, INC.	BACHELOR OF ELEMENTARY EDUCATION	2017	2021	GRADUATE	2021	ACADEMIC EXCELLENCE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

SIGNATURE		DATE	JANUARY 27, 2025
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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.

[illegible]

SIGNATURE		DATE	JANUARY 27, 2025
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[illegible]

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

[illegible]

VIII. OTHER INFORMATION

[illegible]

SIGNATURE		DATE	JANUARY 27, 2025
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**JANUARY 27, 2025**



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)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____  <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____  <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____  <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____  <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
ELRA JENE R. ABASOLA	BARANGAY EASTERN POBLACION, HILONGOS, LEYTE	N/A
ARNIEL P. VISCARA	BARANGAY NAVAL, HILONGOS, LEYTE	N/A
EMMA R. WAGAS, MBA	BARANGAY EASTERN POBLACION, HILONGOS, LEYTE	N/A
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:	PROFESSIONAL REGULATION COMMISSION
ID/License/Passport No.:	1992729
Date/Place of Issuance:	03/16/2023/TACLOBAN CITY


Signature (Sign inside the box)
JANUARY 27, 2025
Date Accomplished



Right Thumbmark

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

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Book No. LXVIV  
Series of 2025

Atty. Ma. Lourdes Madula-Vilbar Notary Public A.P Rubio St Barangay Central Poblacion Hilongos, Leyte Until December 31, 2026 PTR no. 0089218; December 4, 2024; Hilongos, Leyte IBP no. 3280:11/3/2024 Notary Commission No. 278-2024-03
Person Administering Oath