

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	Ebero		
FIRST NAME	Ana Mae	NAME EXTENSION (JR., SR.)	
MIDDLE NAME	Calabia		
3. DATE OF BIRTH (mm/dd/yyyy)	10/21/1998	16. CITIZENSHIP	
4. PLACE OF BIRTH	Brgy. Balugo, Albuera, Leyte	If holder of dual citizenship, please indicate the details.	Pls. indicate country.
5. SEX	Female		
6. CIVIL STATUS	Single	17. RESIDENTIAL ADDRESS	Block 131, Lot 60 House/Block/Lot No. Las Palmas Subdivision/Village Sta. Maria City/Municipality
7. HEIGHT (m)	1.49		Phase 7 Street Cayombo Barangay
8. WEIGHT (kg)	45	ZIP CODE	3022
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	341 House/Block/Lot No. Subdivision/Village Albuera City/Municipality
10. GSIS ID NO.	N/A		St. Niño Street Bahago Barangay Leyte Province
11. PAG-IBIG ID NO.		ZIP CODE	6542
12. PHILHEALTH NO.	1325-0282-0404	19. TELEPHONE NO.	None
13. SSS NO.	06-4359150-7	20. MOBILE NO.	+639551325635
14. TIN NO.		21. E-MAIL ADDRESS (if any)	ebero.anamae@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and last all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NAME EXTENSION (JR., SR.)			
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	Ebero			
FIRST NAME	Antonio	NAME EXTENSION (JR., SR.)		
MIDDLE NAME	Jabillo			
25. MOTHER'S MAIDEN NAME				
SURNAME	Calabia			
FIRST NAME	Ananilia			
MIDDLE NAME	Rosal			

(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	Balugo Elementary School					2011	
SECONDARY	Balugo National High School					2015	1st honorable
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	Visayas State University (State Campus)	BS in Agriculture (Major in Agricultural Economics)	6/1/2015	6/14/2019		2019	
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE

[Signature]

DATE

1/27/2020

[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

1	27	2020
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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)?

If YES, give details: _____

35. a. Have you ever been found guilty of any administrative offense?

If YES, give details: _____

b. Have you been criminally charged before any court?

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?

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?

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)?

If YES, give details: _____

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?

If YES, give details: _____

39. Have you acquired the status of an immigrant or permanent resident of another country?

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?

If YES, please specify: _____

b. Are you a person with disability?

If YES, please specify ID No: _____

c. Are you a solo parent?

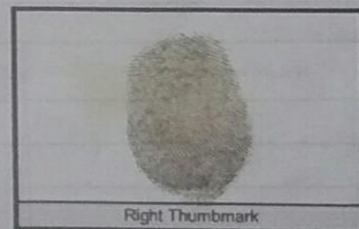
If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
Dr. Maria Hazel I. Bellezas	Inopacan, Leyte	9335390460
Engr. Gwen Avey Mandras	Albuera, Leyte	9386775742

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



Right Thumbmark

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

Government Issued ID: Professional ID

ID/License/Passport No.: 0035863

Date/Place of Issuance: 1/09/2020

Signature (Sign inside the box)

1/27/2020

Date Accomplished

SUBSCRIBED AND SWORN to before me this

DOC. NO. 6058
PAGE NO. 62
BOOK NO. 4
SERIES OF 2020

JAN 27 2020

ATTY. ANTONIO S. MALONZO
NOTARY PUBLIC
887 P. PAREDES ST. SAMP. MLA
TEL. NO. 735-4526
TR. NO. MLA 920015-1-2-2020
PIN NO. 106-187-030
NO. 1085300-2-20-2018-2019
ROLL NO. 25176
PERSONAL ID NO. 009-013 (MS-7)
DATE OF COMPLETION: MAR. 17, 24- APR. 21-28, 2013

affiant exhibiting his/her validly issued government ID as indicated above.

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATIONS

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	University Student Service Office, Visayas State University	8/2/2018	8/2/2018	4.0	Freshmen Facilitator
	Calachuchi Ladies Dormitory - Visca, Baybay, City, Leyte	8/15/2017	6/8/2018		President
	University Inter-Dormitory Student Body - Visca, Baybay, City, Leyte	8/20/2017	6/8/2018		General Treasurer
	Calachuchi Ladies Dormitory - Visca, Baybay, City, Leyte	8/8/2016	6/9/2017		Vice-President
	University Inter-Dormitory Student Body - Visca, Baybay, City, Leyte	8/15/2016	6/9/2017		Socio-Cultural Committee Head

(Continue on separate sheet if necessary)

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

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE	DATE
<i>[Signature]</i>	1/27/2020