

PERSONAL DATA SHEET

WARNING: Any misinterpretation 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	MANAGBANAG		
FIRST NAME	ANN MARIE		NAME EXTENSION (JR., SR)
MIDDLE NAME	BIHAG		
3. DATE OF BIRTH (mm/dd/yyyy)	5/17/2001	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citizenship,  please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" 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:	17. RESIDENTIAL ADDRESS	PUROK 3 House/Block/Lot No. Street PANGASUGAN Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.55m	ZIP CODE	6521
8. WEIGHT (kg)	51kg		
9. BLOOD TYPE	"O"	18. PERMANENT ADDRESS	PUROK 3 House/Block/Lot No. Street PANGASUGAN Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6521
11. PAG-IBIG ID NO.	121326502002		
12. PHILHEALTH NO.	132029495916		
13. SSS NO.	06-4650088-3	19. TELEPHONE NO.	N/A
14. TIN NO.	632-168-615	20. MOBILE NO.	+639773654306
15. AGENCY EMPLOYEE NO.	E231140	21. E-MAIL ADDRESS (if any)	annmarie.managbanag@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		N/A	N/A
MIDDLE NAME	N/A		N/A	N/A
OCCUPATION	N/A		N/A	N/A
EMPLOYER/BUSINESS NAME	N/A		N/A	N/A
BUSINESS ADDRESS	N/A		N/A	N/A
TELEPHONE NO.	N/A		N/A	N/A
24. FATHER'S SURNAME	MANAGBANAG		N/A	N/A
FIRST NAME	ANTONIO		N/A	N/A
MIDDLE NAME	GABOR		N/A	N/A
25. MOTHER'S MAIDEN NAME			N/A	N/A
SURNAME	BIHAG		N/A	N/A
FIRST NAME	MARIA		N/A	N/A
MIDDLE NAME	YANGO		(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	VISCA FOUNDATION ELEMENTARY SCHOOL	PRIMARY	2007	2013	GRADUATE	2013	
SECONDARY	VSU LABORATORY HIGH SCHOOL	SECONDARY	2013	2017	GRADUATE	2017	
	VSU INTEGRATED HIGH SCHOOL	ACCOUNTANCY, BUSINESS AND MANAGEMENT	2017	2019	GRADUATE	2019	WITH HONORS
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN CHEMISTRY	2019	2023	GRADUATE	2023	CHED TDP & COLLEGE SCHOLAR
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	November 3, 2024
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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
	CIVIL SERVICE ELIGIBILITY (PROFESSIONAL)	85.26	03 / 03 / 2024	SAINT JOSEPH COLLEGE-MAASIN CITY, SOUTHERN LEYTE		
	CHEMICAL TECHNICIAN	78.50	10/16/2024	PANALARON CENTRAL SCHOOL, TACLOBAN CITY		

*(Continue on separate sheet if necessary)*

## V. WORK EXPERIENCE

***(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.***

[illegible]

(Continue on separate sheet if necessary)

<b>SIGNATURE</b>		<b>DATE</b>	November 3, 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:

FINISHED CONTRACT

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 speciv ID No:

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	PHONE NO./EMAIL
JACOB GLENN F. JANSALIN	VISAYAS STATE UNIVERSITY	<a href="mailto:jgfdopac@gmail.com">jgfdopac@gmail.com</a>
PATRICIO KYLE B. CELLONA III	BAYBAY CITY, LEYTE	<a href="mailto:kylecellona9924@gmail.com">kylecellona9924@gmail.com</a>
DR. ROMEO DIGNOS	BILIRAN	<a href="mailto:romeo.dignos@reqin8.dost.gov.ph">romeo.dignos@reqin8.dost.gov.ph</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.

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

Government Issued ID: TIN

ID/License/Passport No.: 632-168-615

Date/Place of Issuance: ORMOC CITY, LEYTE

Signature (Sign inside the box)

November 3, 2024

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this NOVEMBER 3,2024 , affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath

PHOTO

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