

# 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	Suello		
FIRST NAME	Jessa	NAME EXTENSION (JR., SR)	
MIDDLE NAME	Relevante		
3. DATE OF BIRTH (mm/dd/yyyy)	November 12, 1992	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	Maangas Presentacion Camarines Sur	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6. CIVIL STATUS	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input checked="" type="checkbox"/> Other/s:		
7. HEIGHT (m)	1.65	17. RESIDENTIAL ADDRESS	Purok Nangka
8. WEIGHT (kg)	48	ZIP CODE	House/Block/Lot No. Street
9. BLOOD TYPE	O		Subdivision/Village
10. GSIS ID NO.	N/A		Macrohon
11. PAG-IBIG ID NO.			City/Municipality
12. PHILHEALTH NO.		ZIP CODE	6600
13. SSS NO.	CRN-0111-4761325-2	18. PERMANENT ADDRESS	Zone 5
14. TIN NO.	N/A	ZIP CODE	House/Block/Lot No. Street
15. AGENCY EMPLOYEE NO.	N/A		Subdivision/Village
			Macrohon
			City/Municipality
		ZIP CODE	4400
		19. TELEPHONE NO.	N/A
		20. MOBILE NO.	09271669981
		21. E-MAIL ADDRESS (if any)	jessasuello22@gamil.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		NAME EXTENSION (JR., SR)	Jemuel San Gabriel	7/22/2017
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	Suello			
FIRST NAME	Jose	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Oliver			
25. MOTHER'S MAIDEN NAME				
SURNAME	Relevante			
FIRST NAME	Nida			
MIDDLE NAME	Coderis		(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	Maangas Elementary School	N/A	6/21/1999	5/5/2005		2005	2nd Honorable mention
SECONDARY	Federico P. Condat Nat'l High School	N/A	6/22/2005	4/27/2009		2009	3rd honorable mention
VOCATIONAL / TRADE COURSE	Sytem Technology Institute- College	Diploma in Hospitality Restaurant and Services	6/24/2009	5/8/2012		2012	
COLLEGE	Visayas State University- Main Campus	Bachelor in Secondary Education major in Filipino	8/14/2017	First sem sly 2020-2021		2021	
GRADUATE STUDIES	N/A	N/A					

(Continue on separate sheet if necessary)

SIGNATURE		DATE	March 22, 2021
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[illegible]

## V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	5/20/2024
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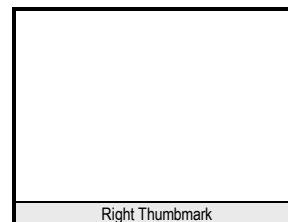
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S						
29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK	
		From	To			
N/A		N/A	N/A	N/A	N/A	
(Continue on separate sheet if necessary)						
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED						
30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	Practice Teaching	11/4/2020	2/12/2021	200.0		Visayas State University -Main Campus
	Google apps tips and tricks: Online Technologies for instruction and Assessment	1/20/2021	1/23/2021	15.0		DICT luzon Cluster 4
	Digital Literacy for Teachers	1/14/2021	1/16/2021	15.0		DICT luzon Cluster 4
	Integrated Circuit Assembly	3/8/2013	8/8/2013	960.0		Texas Instrument- Accreditted bt TESD
	Natinal Certificate in Food and Beverage Services	3/30/2011	3/30/2011	8.0		Technical Education in Skills Developm
	Apprentice training in Housekeeping, FBS, Table setting	2/26/2011	3/6/2011	100.0		M/V Super Ferry
(Continue on separate sheet if necessary)						
VIII. OTHER INFORMATION						
31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
	Communication skill		N/A		N/A	
	Digital Literacy Skill		N/A		N/A	
	Bake cakes and pastrys		N/A		N/A	
(Continue on separate sheet if necessary)						
SIGNATURE				DATE		3/22/2021

<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: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>Dr. Vicente Quiton</td> <td>Palo, Leyte</td> <td>9178855903</td> </tr> <tr> <td>Dr. Melinda Lavega</td> <td>Davao City</td> <td>928768432</td> </tr> <tr> <td>Dr. Susan Enage</td> <td>Baybay Leyte</td> <td>9678957853</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Dr. Vicente Quiton	Palo, Leyte	9178855903	Dr. Melinda Lavega	Davao City	928768432	Dr. Susan Enage	Baybay Leyte	9678957853		
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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>															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td colspan="2">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID:</td> <td>CRN-0111-4761325-2</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>N/A</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>N/A</td> </tr> </table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)		PLEASE INDICATE ID Number and Date of Issuance		Government Issued ID:	CRN-0111-4761325-2	ID/License/Passport No.:	N/A	Date/Place of Issuance:	N/A	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 100px; text-align: center; vertical-align: middle;"> </td> </tr> <tr> <td style="text-align: center;">Signature (Sign inside the box)</td> </tr> <tr> <td style="text-align: center;">3/22/2021</td> </tr> <tr> <td style="text-align: center;">Date Accomplished</td> </tr> </table>		Signature (Sign inside the box)	3/22/2021	Date Accomplished
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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>															



PHOTO



Right Thumbmark