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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. 1. CS ID No. (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes 🔲) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 2 SURNAME **AREVALO** FIRST NAME MARVIN MIDDLE NAME LUNGAY 3. DATE OF BIRTH 01/01/1981 16. CITIZENSHIP (mm/dd/yyyy) ✓ Filipino Dual Citizenship ✓ by birth by naturalization 4. PLACE OF BIRTH BAYBAY CITY, LEYTE If holder of dual citizenship, Pls. indicate country: please indicate the details 5. SEX ✓ Male ☐ Female Philippines ✓ Married ANDRESS BONIFACIO Single 17. RESIDENTIAL ADDRESS 227 6 CIVIL STATUS House/Block/Lot No Widowed Separated PAULINO AVELLANA - ZONE 2 Other/s: Subdivision/Village Barangay BAYBAY LEYTE 7. HEIGHT (m) 1.70 City/Municipality Province 8. WEIGHT (kg) 115 ZIP CODE 6521 18. PERMANENT ADDRESS 227 ANDRESS BONIFACIO 9. BLOOD TYPE B+ House/Block/Lot No. Street PAULINO AVELLANA - ZONE 2 10. GSIS ID NO. N/A Subdivision/Village Barangay BAYBAY LEYTE 11. PAG-IBIG ID NO. 1700-0082-4024 City/Municipality Province 13-050049208-3 12. PHILHEALTH NO ZIP CODE 6521 13. SSS NO. 06-2158792-8 19. TELEPHONE NO. 053-520-8079 14. TIN NO. 927-083-148 09753878840 20. MOBILE NO. 15. AGENCY EMPLOYEE NO N/A 21. E-MAIL ADDRESS (if any) totbenz@yahoo.com FAMILY BACKGROUND 22. SPOUSE'S SURNAME **AREVALO** 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) N/A JULIO LUVINZ G. AREVALO ANA LUCIA FIRST NAME 8/4/2000 MIDDLE NAME **GALENZOGA** OCCUPATION **BARANGAY SECRETARY BARANGAY PAULINO AVELLANA - ZONE 2** EMPLOYER/BUSINESS NAME **BUSINESS ADDRESS** BAYBAY CITY, LEYTE TELEPHONE NO 053-520-8079 24. FATHER'S SURNAME **AREVALO** N/A FIRST NAME DONALD MIDDLE NAME **ALTAREJOS** 25. MOTHER'S MAIDEN NAME SURNAME LUNGAY FIRST NAME **ANTONIETA** MIDDLE NAME DAPITON (Continue on separate sheet if necessary) **EDUCATIONAL BACKGROUND** SCHOLARSHIP/ HIGHEST LEVEL PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR ACADEMIC LEVEL UNITS EARNED GRADUATED HONORS (Write in full) (Write in full) (if not graduated) RECEIVED From To FRANCISCAN COLLEGE OF THE IMMACULATE ELEMENTARY ELEMENTARY GRADUATE 1994 1994 N/A 1989 N/A CONCEPTION FRANCISCAN COLLEGE OF THE IMMACULATE SECONDARY HIGH SCHOOL GRADUATE 1998 1995 1998 NIA N/A CONCEPTION FRANCISCAN COLLEGE OF THE IMMACULATE VOCATIONAL / ASSOCIATE IN COMPUTER SCIENCE 1999 2000 N/A 2000 N/A TRADE COURSE CONCEPTION FRANCISCAN COLLEGE OF THE IMMACULATE BACHELOR OF SCIENCE IN INFORMATION COLLEGE 2000 2002 N/A 2002 N/A CONCEPTION **TECHNOLOGY**

BACHELOR OF SCIENCE IN COMPUTER

2002

2003

N/A

2003

N/A

FRANCISCAN COLLEGE OF THE IMMACULATE

COLLEGE

7. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER		DATAGO	DATE OF	DATE OF			LICENSE (if applicable)		
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE BARANGAY NUTRITION SCHOLAR P.D. 1569			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	ATION / CONFERMENT		NUMBER	Date of Validity
				9/23/2022	CSC	CSC RO VIII			9/23/202
						2			
								_	
			(Co	ntinue on separate sheet if	necessarv)				
	XPERIENCE								
	sive DATES	Start from your recen	t work) Description	on of duties should be	indicated in the attach	ed Work Exp	SALARY/ JOB/ PAY	t	001
(mn	n/dd/yyyy)	POSITION TI (Write in full/Do not a			ICY / OFFICE / COMPANY to not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format *00-0*)/	STATUS OF APPOINTMENT	GOV SERV (Y/-1
From	То	***************************************	IDDOOT				INCREMENT		
/30/2003	10/1/2003	TECHNICAL SU			NC BAYBAY	5,000.00	N/A	CONTRACTUAL	N
0/15/2003	12/15/2010	IT STAF		CHINGBEE TRADING CORPORATION VISAYAS STATE UNIVERSITY/		10,000.00	N/A	REGULAR	N
2/1/2023	Present	ADMINISTRATIVE AIDE III (IT)		OFFICE OF UNIVERSITY REGISTRAR		13,274.00	N/A	JOB ORDER	Y
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29. NAME & ADDRESS OF (Write in fi		INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		
ARANGAY PAULINO AVELLANA - ZONE 2	4/18/2018	Present	N/A	ВА	RANGAY NUTRITION SCHOLAR		
							
H. LEARNING AND DEVELOPMENT (L&D		ntinue on separate : ROGRAMS AT	THE RESERVE AND ADDRESS OF THE PARTY NAMED IN	n			
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			DATES OF DANCE d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
PERFORMANCE EVALUATION		2/15/2007	7o 2/22/2007	28	SUPERVISORY	CHINGBEE TRADING CORPORATION	
IRE PREPAREDNESS AND CONSCIOUSNESS SE	MINAR	3/17/2007	3/17/2007	8	SUPERVISORY	CHINGBEE TRADING CORPORATION	
STIV INTEGRATED PRODUCTIVITY TRAINING	3/12/2009	3/13/2009	16	MANAGERIAL& SUPERVISORY	CHINGBEE TRADING CORPORATION		
HANDS-ON COMPUTER TRAINING ON BARANGAY MANAGEMENT INFORMATION			9/25/2018	16	TECHNICAL	LGU BAYBAY CITY	
SYSTEM FOR 2018 DATA UPDATING AND INTEGRATION OF BNS-OPT PLUS TOOL MELLPI PRO RE-ORIENTATION WORKSHOP			9/19/2019	8	TECHNICAL	CITY HEALTH OFFICE	
ASIC COURSE FOR BARANGAY NUTRITION SCI	HOLARS	4/19/2021	4/23/2021	40	TECHNICAL	NATIONAL NUTRITION COUNCIL	
SO 9001:2015 AWARENESS/RE-AWARENESS VIR	TUAL SEMINAR	2/15/2023	2/15/2023	4	TECHNICAL	VISAYAS STATE UNIVERSITY	
MENTAL HEALTH WELLNESS SEMINAR			4/25/2023	4	TECHNICAL	VISAYAS STATE UNIVERSITY	
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		+	+	-			
	(C	ontinue on separat	sheet if necessa	ary)			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NO	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATIO (Write in full)					
PLAYING CHESS GAMES	CERTIFICATE OF RECOGNITION effort, ar	1 010 / 12011111					
	CERTIFICATE OF APPRECIATI	ION - Has obtain	ned a passing action plan	BNS ASSOCIATION			
					TRISKELION GRAND FRATERNITY		
¥							

*	chief of bureau or office or to the person who has immediate s Bureau or Department where you will be approinted,					
	a. within the third degree? b. within the fourth degree (for Local Government Unit - Caree	YES YES If YES, give deta	✓ NO ✓ NO ills:			
35.	a. Have you ever been found guilty of any administrative offen	☐ YES ☑ NO If YES, give details:				
	b. Have you been criminally charged before any court?	☐ 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 any court or tribunal?	☐ YES ☑ NO If YES, give details:				
37.	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, finithe public or private sector?					
38.	A. Have you ever been a candidate in a national or local election Barangay election)?	☐ YES ☑ NO If YES, give details:				
-	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local ca	☐ YES ☑ NO If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent re	☐ YES ☑ NO If YES, give details (country):				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magn and (c) Solo Parents Welfare Act of 2000 (RA 8972), please a					
a.	Are you a member of any indigenous group?	YES If YES, please spec	☑ NO			
b.	Are you a person with disability?	☐ YES ☑ NO If YES, please specify ID No:				
C.	Are you a solo parent?	☐ YES ☑ NO If YES, please specify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant to	appointee)				
	NAME	ADDRESS	TEL. NO.			
	ATTY.CARLO P. LORETO	BAYBAY CITY LEYTE		==		
	VICE-MAYOR ATTY.ERNESTO M. BUTAWAN	BAYBAY CITY LEYTE		(
	MS.KRISTINE SHAYNE A. CASTOS, RN	BAYBAY CITY LEYTE				
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized representagree that any misrepresentation made in this document administrative/criminal case/s against me.	nt laws, rules and regulations of the stative to verify/validate the contents state	Republic of the ed herein.	PHOTO		
G	iovernment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) **ILEASE INDICATE ID Number and Date of Issuance** overnment Issued ID: NATIONAL ID **Olicense/Passport No.: 2459-7609-5468-2905** ate/Place of Issuance: 03/13/2022/BAYBAY CITY, LEYTE	ox)	Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this 2 1	JUL 2023 , affiant exhib	iting his/her validly iss	ued government ID as indicated above.		

Money CHANCO