

# 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	FRANCISCO		
FIRST NAME	JOAN	NAME EXTENSION (JR., SR)	
MIDDLE NAME	BALUGO		
3. DATE OF BIRTH (mm/dd/yyyy)	05/21/2001	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	HINDANG, 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	325 GAPAELA House/Block/Lot No. Street DOOS DEL NORTE Subdivision/Village Barangay HINDANG LEYTE City/Municipality Province ZIP CODE 6523
7. HEIGHT (m)	1.57	18. PERMANENT ADDRESS	325 GAPAELA House/Block/Lot No. Street DOOS DEL NORTE Subdivision/Village Barangay HINDANG LEYTE City/Municipality Province ZIP CODE 6523
8. WEIGHT (kg)	54	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	UNKNOWN	20. MOBILE NO.	09464856333
10. GSIS ID NO.	N/A	21. E-MAIL ADDRESS (if any)	fjoanb21@gmail.com
11. PAG-IBIG ID NO.	121327422419		
12. PHILHEALTH NO.	13-251941269-5		
13. SSS NO.	06-4659192-8		
14. TIN NO.	N/A		
15. AGENCY EMPLOYEE NO.	N/A		

## II. FAMILY BACKGROUND

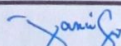
22. SPOUSE'S SURNAME	23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		
MIDDLE NAME		
OCCUPATION		
EMPLOYER/BUSINESS NAME		
BUSINESS ADDRESS		
TELEPHONE NO.		
24. FATHER'S SURNAME		
FIRST NAME	FRANCISCO	
MIDDLE NAME	FRANKLIN	
	LABON	
25. MOTHER'S MAIDEN NAME		
SURNAME	BALUGO	
FIRST NAME	TERESITA	
MIDDLE NAME	ALBESA	

(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	DOOS ELEMENTARY SCHOOL		2007	2013		2013	2ND HONOR
SECONDARY	BONTOC NATIONAL HIGH SCHOOL		2013	2019		2019	WITH HIGH HONORS
VOCATIONAL / TRADE COURSE							
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRIBUSINESS	2019	2023		2023	MAGNA CUM LAUDE
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

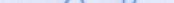
SIGNATURE	DATE
	11/25/2023



[illegible]

## V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	11/25/2023
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[illegible]

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

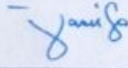
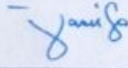
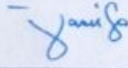



[illegible]

## VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
ORGANIZATIONAL SKILLS	N/A	N/A
LEADERSHIP SKILLS		
COMMUNICATION SKILLS		

SIGNATURE	<i>Xani So</i>	DATE	11/25/2023
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<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: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>MARLEA P. MUÑEZ</td> <td>BAYBAY CITY, LEYTE</td> <td>09621256865</td> </tr> <tr> <td>BRYAN R. GAPASIN</td> <td>VSU, BAYBAY CITY, LEYTE</td> <td>09504142556</td> </tr> <tr> <td>JERUS CABRADILLA</td> <td>BAGUIO DISTRICT, DAVAO CITY</td> <td>09357497380</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	MARLEA P. MUÑEZ	BAYBAY CITY, LEYTE	09621256865	BRYAN R. GAPASIN	VSU, BAYBAY CITY, LEYTE	09504142556	JERUS CABRADILLA	BAGUIO DISTRICT, DAVAO CITY	09357497380
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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>													
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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;"></div> <p style="text-align: center;">Person Administering Oath</p>													