

## 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	MAZO		
FIRST NAME	NIKKA MARIE		NAME EXTENSION (JR., SR)
MIDDLE NAME	MILLEZA		
3. DATE OF BIRTH (mm/dd/yyyy)	MARCH/29/2001	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	DELA PAZ, ANTIPOLLO CITY	If holder of dual citizenship, please indicate the details.	Philippines ▼
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	17. RESIDENTIAL ADDRESS	N/A House/Block/Lot No. _____ Street _____ SITIO SI-ONG _____ GAKAT _____ Subdivision/Village _____ Barangay _____ BAYBAY CITY _____ LEYTE _____ City/Municipality _____ Province _____
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: _____	ZIP CODE	6521
7. HEIGHT (m)	1.52	18. PERMANENT ADDRESS	N/A House/Block/Lot No. _____ Street _____ SITIO SI-ONG _____ GAKAT _____ Subdivision/Village _____ Barangay _____ BAYBAY CITY _____ LEYTE _____ City/Municipality _____ Province _____
8. WEIGHT (kg)	50	ZIP CODE	6521
9. BLOOD TYPE	O+	19. TELEPHONE NO.	N/A
10. GSIS ID NO.	N/A	20. MOBILE NO.	09945448864
11. PAG-IBIG ID NO.	N/A	21. E-MAIL ADDRESS (if any)	nikkamariemazofficial@gmail.com
12. PHILHEALTH NO.	13-250350089-6		
13. SSS NO.	N/A		
14. TIN NO.	N/A		
15. AGENCY EMPLOYEE NO.	N/A		


## 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	NAME EXTENSION (JR., SR)	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	MAZO		N/A	N/A
FIRST NAME	PEDRO	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	HOYUMPA		N/A	N/A
25. MOTHER'S MAIDEN NAME			N/A	N/A
SURNAME	MILLEZA		N/A	N/A
FIRST NAME	WILMA		N/A	N/A
MIDDLE NAME	PIAMONTE		(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	GABAS CENTRAL SCHOOL	PRIMARY EDUCATION	06/06/2012	03/16/2013	GRADE 6	2013	1ST HONORABLE
SECONDARY	BAYBAY CITY SENIOR HIGH SCHOOL	HUMANITIES AND SOCIAL SCIENCES	06/06/2013	04/07/2019	GRADE 12	2019	WITH HONORS
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY EDUCATION	09/12/2019	08/03/2023	FOURTH YEAR	2023	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	April 21 2021
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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 / CONFÈREMENT

LICENSE (If applicable)

NUMBER

Date of  
Validity

(Continue on separate sheet if necessary)

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

28. INCLUSIVE DATES  
(mm/dd/yyyy)

POSITION TITLE  
(Write in full/Do not abbreviate)

DEPARTMENT / AGENCY / OFFICE / COMPANY  
(Write in full/Do not abbreviate)MONTHLY  
SALARY

**SALARY/ JOB/ PAY  
GRADE (if  
applicable)& STEP  
(Format '00-0')/  
INCREMENT**

STATUS OF APPOINTMENT

GOV'T  
SERVICE  
(Y/ N)

From

To

(Continue on separate sheet if necessary)

**SIGNATURE**

DATE \_\_\_\_\_

April 21 2024



## VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)


**VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED**[illegible]

(Continue on separate sheet if necessary)

### VIII. OTHER INFORMATION

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	April 21, 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? ☐ YES ☒ NO

b. within the fourth degree (for Local Government Unit - Career Employees)? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

35. a. Have you ever been found guilty of any administrative offense? ☐ 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 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: \_\_\_\_\_

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? ☐ YES ☒ NO

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? ☐ 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? ☐ YES ☒ NO

If YES, please specify: \_\_\_\_\_

b. Are you a person with disability? ☐ YES ☒ NO

If YES, please specify ID No: \_\_\_\_\_

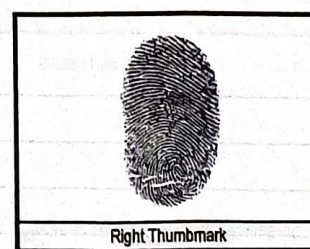
c. Are you a solo parent? ☐ YES ☒ NO

If YES, please specify ID No: \_\_\_\_\_

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

NAME	ADDRESS	TEL. NO.
Noel V. Moscatiles	Baybay City, Leyte	9700683389
Glenda Arradaza	Baybay City, Leyte	9977735600
Novelyn Mendoza	Baybay City, Leyte	9557538168

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: PhilHealth

ID/License/Passport No.: 13-250350089-6

Date/Place of Issuance: August, 2023

Signature (Sign inside the box)

Date Accomplished: April 22, 2024

SUBSCRIBED AND SWORN to before me this APR 22 2024 at Baybay City, Leyte by NIKKA MARIE M. MAZO for the affiant exhibiting his/her validly issued government ID as indicated above.

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BOOK NO. 1  
SERIES OF: 74

Notary Public for the Province of Leyte  
Until December 31, 2025  
PTR No. BC0210261 - Jan. 3, 2024  
IDP C.R. No. 395726 - Jan. 3, 2024  
MCLE COMPLIANCE NO. VII-COC6763-Valid until April 14, 2025  
Attorney's Roll No. 41458  
Person Administering Oath