

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	Jamin		
FIRST NAME	Irah May	NAME EXTENSION (JR., SR)	
MIDDLE NAME	Ebina		
3. DATE OF BIRTH (mm/dd/yyyy)	12/27/1998	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	Naval, Biliran	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	House/Block/Lot No. Street San Pablo Subdivision/Village Barangay Naval Biliran City/Municipality Province
7. HEIGHT (m)	1.52	ZIP CODE	6543
8. WEIGHT (kg)	65		
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	House/Block/Lot No. Street San Pablo Subdivision/Village Barangay Naval Biliran City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6543
11. PAG-IBIG ID NO.	121275929911		
12. PHILHEALTH NO.	132026337120		
13. SSS NO.	35-1449396-4	19. TELEPHONE NO.	N/A
14. TIN NO.	771-847-543	20. MOBILE NO.	09685492680
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	irahjamin21@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		NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	Jamin			
FIRST NAME	Ireneo	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Pateo			
25. MOTHER'S MAIDEN NAME				
SURNAME	Ebina			
FIRST NAME	Marylene			
MIDDLE NAME	Delos Santos		(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	San Pablo Elementary School	Basic Education	2005	2011		2011	valedictorian
SECONDARY	Naval School of Fisheries	Basic Education	2011	2015		2015	salutatorian
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	Visayas State University	Bachelor of Science in Agricultural Chemistry	2015	2020		2020	DOST-SEI Scholar
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	May 2, 2023
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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
CHEMIST LICENSURE EXAM PASSER	73.8	10/17-18/2022	TACLOBAN CITY	0015252	2022-2025
LICENSE CHEMICAL TECHNICIAN	82.0	10/10/2019	CEBU CITY	0003773	2019-2022
CIVIL SERVICE ELIGIBILITY-PROFESSIONAL LEVEL	81.21	03/17/2019	ORMOC CITY	N/A	N/A

(Continue on separate sheet if necessary)


V. WORK EXPERIENCE

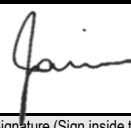
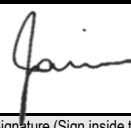
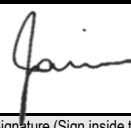






(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

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	GOVT SERVICE (Y/ N)
From	To						
01/10/2022	04/08/2022	LABORATORY TECHNICIAN II	DEPARTMENT OF AGRICULTURE 08 REGIONAL SOILS LABORATORY	18000.00	N/A	JO-COS	Y
08/02/2021	12/31/2021	LABORATORY TECHNICIAN II	DEPARTMENT OF AGRICULTURE 08 REGIONAL SOILS LABORATORY	16000.00	N/A	INSTITUTIONAL	Y
10/05/2020	02/26/2021	INSTRUCTOR	DEPARTMENT OF PURE AND APPLIED CHEMISTRY VISAYAS STATE UNIVERSITY	15000.00	N/A	PART-TIME	Y

(Continue on separate sheet if necessary)

SIGNATURE		DATE	02/05/2023
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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						
(Continue on separate sheet if necessary)						
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED						
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)						
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			
	IMPLEMENTATION OF THE STANDARD OPERATION PROCEDURE FOR SOIL ELECTRICAL CONDUCTIVITY (SOIL/WATER, 1:5)	12/14/2021	12/14/2021	2	TECHNICAL	GLOBAL SOIL LABORATORY NETWORK
	HANDLING AND PREPARATION OF SOIL SAMPLES FOR CHEMICAL AND PHYSICAL ANALYSES	12/06/2021	12/06/2021	2	TECHNICAL	GLOBAL SOIL LABORATORY NETWORK
	WEBINAR ON THE DETERMINATION OF SOIL PHOSPHOROUS BY OLSEN METHOD	12/01/2021	12/01/2021	2	TECHNICAL	GLOBAL SOIL LABORATORY NETWORK
	IMPLEMENTATION OF THE STANDARD OPERATING PROCEDURE FOR SOIL ORGANIC CARBON (WALKLEY AND BLACK: TITRATION AND COLORIMETRIC METHODS)	11/17/2021	11/17/2021	3	TECHNICAL	GLOBAL SOIL LABORATORY NETWORK
	IMPLEMENTATION OF THE STANDARD OPERATING PROCEDURE FOR SATURATED SOIL PASTE EXTRACT	11/09/2021	11/09/2021	2	TECHNICAL	GLOBAL SOIL LABORATORY NETWORK
(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)	
	N/A		N/A		N/A	
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	02/05/2023	

<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> <hr/> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Resignation and finished contract</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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>MA. KRIS V. TOLENTINO</td> <td>DEPARTMENT OF AGRICULTURE RFO8</td> <td>9171764150</td> </tr> <tr> <td>JAYVEE A. DELA TORRE</td> <td>DEPARTMENT OF AGRICULTURE RFO8</td> <td>9060490466</td> </tr> <tr> <td>JACOB GLENN F. JANSALIN</td> <td>VISCA, BAYBAY CITY, LEYTE</td> <td>9267490881</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	MA. KRIS V. TOLENTINO	DEPARTMENT OF AGRICULTURE RFO8	9171764150	JAYVEE A. DELA TORRE	DEPARTMENT OF AGRICULTURE RFO8	9060490466	JACOB GLENN F. JANSALIN	VISCA, BAYBAY CITY, LEYTE	9267490881		
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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> <div style="border: 1px solid black; width: 300px; height: 20px; margin: 10px auto; text-align: center;"> Person Administering Oath </div>															