

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 if accomplished through own handwriting. Tick appropriate boxes ☐ ☐ and use separate sheet if necessary. Indicate N/A if not applicable. **DO NOT ABBREVIATE.**

I. PERSONAL INFORMATION

1. SURNAME	BORELA		
2. FIRST NAME	SALOME		N/A
MIDDLE NAME	MAGNO		
3. DATE OF BIRTH (dd/mm/yyyy)	1/16/2003	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	Baybay City, Leyte	If holder of dual citizenship, please indicate the details.	
5. SEX AT BIRTH	<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:		
7. HEIGHT (m)	1.44 m	17. RESIDENTIAL ADDRESS	Purok 2 Lower Gymnasium House/Block/Lot No. Street Brgy. San Agustin Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
8. WEIGHT (kg)	45kg	ZIP CODE	6525
9. BLOOD TYPE	Type O	18. PERMANENT ADDRESS	Purok 2 Lower Gymnasium House/Block/Lot No. Street Brgy. San Agustin Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
10. UMID ID NO.	06-5183943-9	ZIP CODE	6525
11. PAG-IBIG ID NO.	121376545317	19. TELEPHONE NO.	
12. PHILHEALTH NO.	13-025674033-9	20. MOBILE NO.	09063952293
13. PhilSys Number (PSN):	5879-3573-1629-4138	21. E-MAIL ADDRESS (if any)	salomeborela08@gmail.com
14. TIN NO.	683-298-519-00000		
15. AGENCY EMPLOYEE NO.			

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (dd/mm/yyyy)
FIRST NAME	NAME EXTENSION (JR., SR)			
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	BORELA		N/A	
FIRST NAME	RENATO	N/A		
MIDDLE NAME	ANOTA			
25. MOTHER'S MAIDEN NAME			MARCH 22, 1970	
SURNAME	MAGNO			
FIRST NAME	BERNARDITA			
MIDDLE NAME	VILLACORTA		(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	BRGY. SAN AGUSTIN ELEMENTARY SCHOOL					2015	
SECONDARY	BRGY. BUNGA NATIONAL HIGHSCHOOL					2019	
VOCATIONAL /	SAINT JOHN PAROCHIAL SCHOOL TIAONG QUEZON	GENERAL ACADEMIC STRAND				2021	WITH HIGH HONOR
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRICULTURE MAJOR IN ANIMAL SCIENCE				2025	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRICULTURE MAJOR IN ANIMAL SCIENCE				2025	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	December 10, 2025
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[illegible]

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

[illegible]

VIII. OTHER INFORMATION

[illegible]

				(Continue on separate sheet if necessary)			
SIGNATURE		(wet signature/e-signature/digital certificate)		DATE			

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? b. within the fourth degree (for Local Government Unit - Career Employees)?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____	
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input type="checkbox"/> 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?	<input type="checkbox"/> YES <input type="checkbox"/> 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?	<input type="checkbox"/> YES <input type="checkbox"/> 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)? 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?	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____	
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details (country): _____	
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277, as amended); and (c) Expanded Solo Parents Welfare Act (RA 11861), please answer the following items: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	<input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please specify ID No: _____	
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	OFFICE / RESIDENTIAL ADDRESS	CONTACT NO. AND/OR EMAIL
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: ID/License/Passport No.: Date/Place of Issuance:	<div style="border: 1px solid black; height: 100px; display: flex; align-items: center; justify-content: center; color: red; font-weight: bold;"> (wet signature/e-signature/digital certificate) </div> <div style="border: 1px solid black; padding: 2px; text-align: center; margin-top: 5px;">Signature (Sign inside the box)</div> <div style="border: 1px solid black; padding: 2px; text-align: center; margin-top: 5px;">Date Accomplished</div>	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto; display: flex; align-items: center; justify-content: center; text-align: center;"> Passport-sized unfiltered digital picture taken within the last 6 months 4.5 cm. X 3.5 cm </div> <p style="text-align: center; margin-top: 10px;">PHOTO</p> <div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> Right Thumbmark </div>
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.		
<div style="border: 1px solid black; width: 300px; margin: 0 auto; padding: 5px;"> <div style="color: red; font-weight: bold; text-align: center;">(wet signature/e-signature/digital certificate except for notary public)</div> <div style="border: 1px solid black; padding: 2px; text-align: center; margin-top: 5px;">Person Administering Oath</div> </div>		