

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

PERSONAL INFORMATION													
1. SURNAME		ORIT											
2. FIRST NAME		MARY JEANNE						NAME EXTENSION (JR, SR) N/A					
MIDDLE NAME		PALER											
3. DATE OF BIRTH (dd/mm/yyyy)		03/01/1981		16. CITIZENSHIP		<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization							
4. PLACE OF BIRTH		CITY OF MAASIN		If holder of dual citizenship, please indicate the details.		P/s. indicate country.							
5. SEX AT BIRTH		<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female											
6. CIVIL STATUS		<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s		17. RESIDENTIAL ADDRESS		00143 TOMAS OPPUS							
						House/Block/Lot No.		Street					
						N/A		MANTAHAN					
						Subdivision/Village		Barangay					
						CITY OF MAASIN		SOUTHERN LEYTE					
						City/Municipality		Province					
7. HEIGHT (m)		1.49											
8. WEIGHT (kg)		58		ZIP CODE		6600							
9. BLOOD TYPE		B+		18. PERMANENT ADDRESS		00143 TOMAS OPPUS							
						House/Block/Lot No.		Street					
						N/A		MANTAHAN					
						Subdivision/Village		Barangay					
						CITY OF MAASIN		SOUTHERN LEYTE					
						City/Municipality		Province					
10. UMID ID NO.		003377200352				ZIP CODE		6600					
11. PAG-IBIG ID NO.		1700006141132											
12. PHILHEALTH NO.		130000548538											
13. PHILSYS NUMBER (PSN)		4703615264508302		19. TELEPHONE NO.		N/A							
14. TIN NO.		219409093		20. MOBILE NO.		09268600264							
15. AGENCY EMPLOYEE NO.		0007628		21. E-MAIL ADDRESS (if any)		maryjeanne.orit061@deped.gov.ph							
FAMILY INFORMATION													
22. SPOUSE'S SURNAME		ORIT		23. NAME of CHILDREN (Write full name and last all)				DATE OF BIRTH (dd/mm/yyyy)					
FIRST NAME		DARWIN		NAME EXTENSION (JR, SR)		VINCENT JUDE P ORIT		22/11/2005					
MIDDLE NAME		DANTE				MARY DAWN P ORIT		20/12/2010					
OCCUPATION		GOVERNMENT EMPLOYEE				MARY STEPHWIN P ORIT		01/07/2018					
EMPLOYER/BUSINESS NAME		PHILIPPINE NATIONAL POLICE											
BUSINESS ADDRESS		MCPS MAASIN CITY SOUTHERN LEYTE											
TELEPHONE NO.		N/A											
24. FATHER'S SURNAME		PALER											
FIRST NAME		GENARO		NAME EXTENSION (JR, SR)									
MIDDLE NAME		MONTEDERAMOS											
25. MOTHER'S MAIDEN NAME													
SURNAME		DARBE											
FIRST NAME		LEONARDA											
MIDDLE NAME		SALUDO											
EDUCATION													
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		MAASIN CENTRAL SCHOOL		ELEMENTARY		1987 1993		PRIMARY EDUCATION		1993		FIRST HONORABLE MENTION	
SECONDARY		SAINT JOSEPH COLLEGE		HIGH SCHOOL		1993 1997		HIGHSCHOOL EDUCATION		1997		PESFA SCHOLAR	
VOCATIONAL / TRADE COURSE		N/A		N/A				N/A		N/A		N/A	
COLLEGE		SAINT JOSEPH COLLEGE		BACHELOR OF SCIENCE IN ACCOUNTANCY		1997 2001		GRADUATED		2001		ACADEMIC SCHOLAR 1999	
GRADUATE STUDIES		N/A		N/A				N/A		N/A		N/A	
SIGNATURE										DATE			
25/10/2025													

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

29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (dd/mm/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
	From	To		
N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)


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

30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (dd/mm/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
	From	To			
DEPED NEU 16TH NATIONAL CONGRESS AND SEMINAR-WORKSHOP ON RESPONSIBLE PUBLIC SECTOR UNIONISM	26/11/2024	28/11/2024	24	TECHNICAL	DEP ED CENTRAL OFFICE
SEMINAR WORKSHOP ON GENDER AND DEVELOPMENT ANALYSIS(GA) TOOLS	05/11/2024	07/11/2024	24	TECHNICAL	PROVINCIAL OFFICE OF SOUTHERN LEYTE
ORIENTATION ON MAGNA CARTA OF WOMEN AND SAFE SPACES ACT	17/10/2024	18/10/2024	16	TECHNICAL	PROVINCIAL OFFICE OF SOUTHERN LEYTE
2024 VISAYAS CLUSTER ASSEMBLY ON RESPONSIBLE PUBLIC SECTOR UNIONISM	24/06/2024	26/06/2024	24	TECHNICAL	DEP ED CENTRAL OFFICE
2ND REGIONAL MEETING OF NEU RO8 EXECUTIVE OFFICER AND NEU DIVISION CHAPTER PRESIDENTS	10/06/2024	11/06/2024	16	TECHNICAL	DEP ED RO VIII
ASSEMBLY OF PROVIDENT FUND COMMITTEE	05/03/2024	06/03/2024	16	TECHNICAL	DEP ED RO VIII
DEPED NEU 15TH NATIONAL CONGRESS AND SEMINAR-WORKSHOP ON RESPONSIBLE PUBLIC SECTOR UNIONISM	29/11/2023	01/12/2023	24	TECHNICAL	DEP ED CENTRAL OFFICE
2023 VISAYAS CLUSTER ASSEMBLY ON RESPONSIBLE SECTOR UNIONISM	21/09/2023	23/09/2023	24	TECHNICAL	DEP ED CENTRAL OFFICE
ORIENTATION AND WORKSHOP ON KEY AREAS(KRAS) OF NEWLY-HIRED AND INCUMBENT ADMINISTRATIVE OFFICER II	11/09/2023	13/09/2023	24	TECHNICAL	DEP ED DIVISION OFFICE
14TH NATIONAL CONGRESS AND SEMINAR-WORKSHOP OF THE DEPED-NEU	05/12/2022	07/12/2022	24	TECHNICAL	DEP ED CENTRAL OFFICE
ORIENTATION AND PRESENTATION OF PROCESS WORKFLOW AND TIMELINES OF SOUTHERN LEYTE DPSU	21/10/2022	21/10/2022	8	TECHNICAL	DEP ED DIVISION OFFICE
ORIENTATION AND PRESENTATION OF PROCESS WORKFLOW AND	21/10/2022	21/10/2022	8	TECHNICAL	DEP ED DIVISION OFFICE
2022 CLUSTERED ASSEMBLIES ON RESPONSIBLE PUBLIC SECTOR UNIONISM OF DEPED-NEU	24/08/2022	26/08/2022	24	TECHNICAL	DEP ED CENTRAL OFFICE
TRAINING ON EXAMINATION ADMINISTRATION(TEA)	12/07/2022	12/07/2022	3	MANAGERIAL	CIVIL SERVICE COMMISSION
SEMINAR ON CAPACITY BUILDING ON DIGITAL LITERACY FOR VARIOUS MODALITIES OF ONLINE PLATFORMS FOR NON-TEACHING PERSONNEL,BATCH 2	27/06/2022	29/06/2022	24	TECHNICAL	DEP ED DIVISION OFFICE
DEPED MID-TERM REVIEW AND ENHANCEMENT PLANNING WORKSHOP	23/09/2015	23/09/2015	8	TECHNICAL	DEP ED DIVISION OFFICE
FY 2016 BUDGET PROPOSAL PREPARATION WORKSHOP	03/04/2015	03/04/2015	8	TECHNICAL	DEP ED RO VIII
SEMINAR ON UPDATING E-FRS AND FY 2016 BUDGET PROPOSAL PREPARATION WORKSHOP	04/03/2015	05/03/2015	16	TECHNICAL	DEP ED RO VIII

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
DRAFTING	AWARDEE FOR SUCCESSFUL ESTABLISHMENT OF DIVISION PAYROLL UNIT	DEPARTMENT OF EDUCATION- NATIONAL EMPLOYEES UNION-CHAPTER PRESIDENT SOUTHERN LEYTE CHAPTER
PLAYING VOLLEYBALL	RECOGNITION AS MEMBER OF SOUTHERN LEYTE PROVINCIAL SCHOOL BOARD	
	RECOGNITION AS MOST IMPROVE OFFICE	
	RECOGNITION FOR EXTENDING OVERTIME SERVICES WHICH RESULTED TO TIMELY SUBMISSION OF REPORTS	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	25/10/2025
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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, as amended); and (c) Expanded 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, give details: _____</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: 40%;">OFFICE / RESIDENTIAL ADDRESS</th> <th style="width: 25%;">CONTACT NO. AND/OR EMAIL</th> </tr> </thead> <tbody> <tr> <td>GENIS S. MURALLOS, EDD CESO V</td> <td>DEPED, DIVISION OF MAASIN CITY</td> <td>(053) 570-8066</td> </tr> <tr> <td>JOEL A. ZARTIGA, PHD CESO VI</td> <td>DEPED, DIVISION OF SAMAR</td> <td>(055) 251-2595</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	OFFICE / RESIDENTIAL ADDRESS	CONTACT NO. AND/OR EMAIL	GENIS S. MURALLOS, EDD CESO V	DEPED, DIVISION OF MAASIN CITY	(053) 570-8066	JOEL A. ZARTIGA, PHD CESO VI	DEPED, DIVISION OF SAMAR	(055) 251-2595			
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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>													
<p>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: DRIVER'S LICENSE</p> <p>ID/License/Passport No.: HO509000517</p> <p>Date/Place of Issuance: MAASIN CITY</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; height: 80px;"> Signature (Sign inside the box) 25/10/2025 Date Accomplished </td> <td style="width: 150px; height: 150px; text-align: center;"> Right Thumbmark </td> </tr> </table>	 Signature (Sign inside the box) 25/10/2025 Date Accomplished	 Right Thumbmark										
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<p>SUBSCRIBED AND SWORN to before me this <u>25</u> day of <u>OCT</u> 20<u>25</u> at _____, agent exhibiting his/her validly issued government ID as indicated above.</p> <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>Doc No. _____</p> <p>Page No. _____</p> <p>Book No. _____</p> <p>Series of _____</p> </div> <div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>ATTY. LYLWIN LLOYD A. LIM NOTARY PUBLIC Commission No. 2024-30 Until December 31, 2026 Roll of Attorneys _____ PTR No. 045-085-12-20-20-25</p> </div> </div>													

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