

# 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	GUILLEN		
FIRST NAME	ALYZZA JIREH GABRIELLE		NAME EXTENSION (JR., SR)
MIDDLE NAME	DOMINGUIANO		
3. DATE OF BIRTH (mm/dd/yyyy)	03/31/1998	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	DAVAO CITY	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	P4A House/Block/Lot No. Street HINAPOYAN Subdivision/Village Barangay CARMEN SURIGAO DEL SUR City/Municipality Province 8315
7. HEIGHT (m)	1.52m	ZIP CODE	8315
8. WEIGHT (kg)	40kg		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	P4A House/Block/Lot No. Street HINAPOYAN Subdivision/Village Barangay CARMEN SURIGAO DEL SUR City/Municipality Province 8315
10. GSIS ID NO.	N/A	ZIP CODE	8315
11. PAG-IBIG ID NO.	121315114557		
12. PHILHEALTH NO.	182509643599		
13. SSS NO.	08-2882019-0	19. TELEPHONE NO.	N/A
14. TIN NO.	775-705-369-00000	20. MOBILE NO.	0921-593-3427
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	<a href="mailto:aguillen691@gmail.com">aguillen691@gmail.com</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		NAME EXTENSION (JR., SR)	N/A	
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	GUILLEN			
FIRST NAME	GABRIEL CHRISTOPHER	NAME EXTENSION (JR., SR)		
MIDDLE NAME	DE LEON			
25. MOTHER'S MAIDEN NAME				
SURNAME	DOMINGUIANO			
FIRST NAME	MARIA LIZA			
MIDDLE NAME	REMOLANO			
(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	CANTILAN PILOT SCHOOL	PRIMARY EDUCATION	6/0/2004	3/0/2010		2010	N/A
SECONDARY	SURIGAO DEL SUR STATE UNIVERSITY	HIGH SCHOOL	6/0/2010	3/0/2014		2014	5TH HONOR
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRICULTURE	6/0/2014	6/15/2018		2018	CUM LAUDE
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	JULY 29, 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
	LICENSED AGRICULTURIST	82.3	NOV. 5-7, 2019	TACLOBAN CITY, LEYTE	0032784	12/04/2019- 03/31/2025
	CIII. SERVICE - HONOR GRADUATE ELIGIBILITY	N/A	JUN 15, 2019	TACLOBAN CITY, LEYTE	10010818080 1	N/A

## V. WORK EXPERIENCE

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

[illegible]

<b>SIGNATURE</b>	<i>Jillian</i>	<b>DATE</b>	JULY 29, 2023
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[illegible]

(Continue on separate sheet if necessary)







[illegible]

(Continue on separate sheet if necessary)

[illegible]

(Continue on separate sheet if necessary)

<b>SIGNATURE</b>		<b>DATE</b>	<b>JULY 29, 2023</b>
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<p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to 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</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>JOSE L. BACUSMO</td> <td>VISAYAS STATE UNIVERSITY. BAYBAY CITY, LEYTE</td> <td>0968-690-6880</td> </tr> <tr> <td>FAUSTINO P. VILLAMAYOR</td> <td>VISAYAS STATE UNIVERSITY. BAYBAY CITY, LEYTE</td> <td>0932-582-6874</td> </tr> <tr> <td>PROF. LUZ MORENO</td> <td>VISAYAS STATE UNIVERSITY. BAYBAY CITY, LEYTE</td> <td>0916-423-9381</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	JOSE L. BACUSMO	VISAYAS STATE UNIVERSITY. BAYBAY CITY, LEYTE	0968-690-6880	FAUSTINO P. VILLAMAYOR	VISAYAS STATE UNIVERSITY. BAYBAY CITY, LEYTE	0932-582-6874	PROF. LUZ MORENO	VISAYAS STATE UNIVERSITY. BAYBAY CITY, LEYTE	0916-423-9381
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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: 250px; height: 60px; margin: 10px auto;"></div> <div style="border: 1px solid black; width: 250px; height: 30px; margin: 10px auto; text-align: center;"> <p>Person Administering Oath</p> </div>													