

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. R08-20240829-022

I. PERSONAL INFORMATION

2. SURNAME	GIL		
FIRST NAME	JOHN EARL	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	OGARO		
3. DATE OF BIRTH (mm/dd/yyyy)	6/10/1999	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	TANAUAN, LEYTE	If holder of dual citizenship, please indicate the details.	Please indicate country: ▼
5. SEX	<input checked="" type="checkbox"/> Male <input 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	N/A N/A House/Block/Lot No. Street N/A SANTO NIÑO Subdivision/Village Barangay TANAUAN LEYTE City/Municipality Province
7. HEIGHT (m)	1.73 M.	ZIP CODE	6502
8. WEIGHT (kg)	87 KG.		
9. BLOOD TYPE	AB+	18. PERMANENT ADDRESS	N/A N/A House/Block/Lot No. Street N/A SANTO NIÑO Subdivision/Village Barangay TANAUAN LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6502
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	13-251009534-4	19. TELEPHONE NO.	N/A
13. SSS NO.	N/A	20. MOBILE NO.	09658945420
14. TIN NO.	656772510	21. E-MAIL ADDRESS (if any)	GILJOHNEARL25@GMAIL.COM
15. AGENCY EMPLOYEE NO.	866		

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	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	GIL			
FIRST NAME	TYRONE	NAME EXTENSION (JR., SR) SR.		
MIDDLE NAME	MOLINA			
25. MOTHER'S MAIDEN NAME				
SURNAME	OGARO			
FIRST NAME	SUSANA			
MIDDLE NAME	CUMPIO		(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	STO. NIÑO ELEMENTARY SCHOOL	BASIC EDUCATION	6/1/2006	3/16/2012	GRADUATED	2012	WITH HONORS
SECONDARY	TANAUAN NATIONAL HIGHSCHOOL	BASIC EDUCATION	6/2/2014	3/29/2018	GRADUATED	2018	WITH HONORS
VOCATIONAL / TRADE COURSE	LEYTE NATIONAL HIGH SCHOOL	SCIENCE TECHNOLOGY ENGINEERING MANAGEMENT	6/5/2018	3/30/2020	GRADUATED	2020	WITH HONORS
COLLEGE	VISAYAS STATE UNIVERSITY- TOLOSA	BS- CRIMINOLOGY	8/18/2020	8/1/2024	GRADUATED	2024	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	03/27/25
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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
	Presidential Decree No. 907	1.680 GWA	8/29/2024	CIVIL SERVICE COMMISSION REGIONAL OFFICE 8	100108241611	8/29/2024
	DRIVER'S LICENCE	N/A	8/1/2023	TACLOBAN CITY LICENSING CENTER	HO2-23- 005981	8/2/2023
	Registered Criminologist	80.4	5/2/2025	LEYTE COLLEGES TACLOBAN, CITY	pending	pending

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				SALARY/ JOB/ PAY	
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[illegible]

SIGNATURE		DATE	02/07/05
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SIGNATURE		DATE	03/27/25
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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

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Computer Literate	N/A	NETHUB ORG.

(Continue on separate sheet if necessary)

SIGNATURE		DATE	03/27/25
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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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details:</p> <hr/>															
<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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details:</p> <hr/> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details:</p> <hr/>															
<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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details:</p> <hr/>															
<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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details:</p> <hr/> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details:</p> <hr/>															
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details (country):</p> <hr/>															
<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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, please specify: _____</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, please specify ID No: _____</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <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>HON. ALEX MIRALLES</td> <td>BRGY. SANTO NIÑO TANAUAN, LEYTE</td> <td>9654887874</td> </tr> <tr> <td>MRS. LORELIE C. REDOÑA</td> <td>BRGY. SANTA CRUZ TANAUAN, LEYTE</td> <td>9612396113</td> </tr> <tr> <td>MRS. TYNIA ROSE G. TANGPUZ</td> <td>BRGY. PAGO TANAUAN, LEYTE</td> <td>9674107874</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	HON. ALEX MIRALLES	BRGY. SANTO NIÑO TANAUAN, LEYTE	9654887874	MRS. LORELIE C. REDOÑA	BRGY. SANTA CRUZ TANAUAN, LEYTE	9612396113	MRS. TYNIA ROSE G. TANGPUZ	BRGY. PAGO TANAUAN, LEYTE	9674107874			
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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>																
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td colspan="2">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID:</td> <td>DRIVER'S LICENSE</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>H02-23-005981</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>08/02/2023</td> </tr> </table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)		PLEASE INDICATE ID Number and Date of Issuance		Government Issued ID:	DRIVER'S LICENSE	ID/License/Passport No.:	H02-23-005981	Date/Place of Issuance:	08/02/2023	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; height: 80px;"> </td> </tr> <tr> <td style="text-align: center;">Signature (Sign inside the box)</td> </tr> <tr> <td style="text-align: center;">03/27/25</td> </tr> <tr> <td style="text-align: center;">Date Accomplished</td> </tr> </table>		Signature (Sign inside the box)	03/27/25	Date Accomplished	<div style="text-align: center;"> <p>PHOTO</p> </div> <div style="border: 1px solid black; height: 100px; margin-top: 10px;"></div> <div style="text-align: center; margin-top: 5px;">Right Thumbmark</div>
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Date Accomplished																
<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="text-align: center; margin-top: 5px;">Person Administering Oath</div>																