Revised 2017

PERSONAL DATA SHEET

concerned. READ THE ATTACHED GUIDE T	on made in the Personal Data Sneet and the	ET (PDS) BEFORE ACCOMI	PLISHING THE	PDS FORM	1.	criminai case/s a			
Print legibly. Tick appropriate boxes (I. PERSONAL INFORMATION) and use separate sheet if necessary. Indicate I	N/A if not applicable. DO NOT	ABBREVIATE.		1. CS ID No.		(Do not fill up. I	For CSC use only)	
	DONATO								
						NAME EXTENSION (JR	L, SR)	N/A	
	RUSSELL MARIE								
MIDDLE NAME	OCHEA			ı					
DATE OF BIRTH (mm/dd/yyyy)	12/2/1996	16. CITIZENSHIP							
4. PLACE OF BIRTH	MATAG-OB LEYTE		older of dual citizenship,			Pls. indicate country:			
5. SEX	FEMALE	please indicate the de	etails.						
6 CIVIL STATUS	SINGLE	17. RESIDENTIAL ADDRESS	Hou	se/Block/Lot No	0.		Street		
			C.,	ndivinian A filla ar			Imelda		
7. HEIGHT (m)	5.1		Subdivision/Village Matag-ob		Barangay Leyte				
8. WEIGHT (kg)	47	ZIP CODE	Ci	ty/Municipality			Province		
9. BLOOD TYPE	Aplus	18. PERMANENT ADDRESS	Hou	se/Block/Lot No	•		Street		
10. GSIS ID NO.							Imelda		
11. PAG-IBIG ID NO.				Matag-ob			Barangay Leyte		
12. PHILHEALTH NO.		ZIP CODE	C	ty/Municipality			Province		
13. SSS NO.		19. TELEPHONE NO.							
14. TIN NO.		20. MOBILE NO.			09	9976875850			
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)		rus	ssemaried	donato@gmail.com			
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	None		23. NAME of CHI	LDREN (Write	full name and	list all)	DATE OF BIRT	TH (mm/dd/yyyy)	
FIRST NAME		NAME EXTENSION (JR., SR)		None			None		
MIDDLE NAME									
OCCUPATION									
EMPLOYER/BUSINESS NAME									
BUSINESS ADDRESS									
TELEPHONE NO.									
24. FATHER'S SURNAME	Donato								
FIRST NAME	Roel	NAME EXTENSION (JR., SR)							
MIDDLE NAME	Ochea								
25. MOTHER'S MAIDEN NAME. Oc	chea								
SURNAME	Donato								
FIRST NAME	Merlita								
MIDDLE NAME	Omega			(C	ontinue on sei	parate sheet if neces	sarv)		
III. EDUCATIONAL BACKGR	=			,,,				_	
				DEDIOD OF	ATTENDANCE	HIGHEST LEVEL/		SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/CO (W	Vrite in full)	From	To	UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	Matag-ob Central School	Primary		6/15/2003	3/16/2009		2009	9th Honor	
SECONDARY	Matag-ob National High School	Secondary		6/13/2009	3/17/2013		2013		
VOCATIONAL /									
COLLEGE	Visayas State University	Tertiary		6/7/2013	6/14/2019		2019		
GRADUATE STUDIES		,							
GIVADOW I E 9 I ODIE9	10	Continuo on conserte - b - 4 %	occand)						
SIGNATURE	(0	Continue on separate sheet if nece	ssary)	DA	ITE		June 10,2021		

1.00 1.00	IV. CIVIL S	ERVICE ELIG	GIBILITY							
Set recommendation of against about financiary (Victorial Section 2017)	SDECIAL LAWS/CES/CSEE							LICENSE (if applicable) MENT Date of		
WORK EXPERIENCE INCLUSIVE DATES POSITION TITLE (With a fishCoord April 5,2015 Apr				(If Applicable)					NUMBER	
WORK EXPERIENCE INCLUSIVE DATES POSITION TITLE (With a fishCoord April 5,2015 Apr										
WORK EXPERIENCE INCLUSIVE DATES POSITION TITLE (With a fishCoord April 5,2015 Apr										
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WORK EXPERIENCE INCLUSIVE DATES POSITION TITLE (With a fishCoord April 5,2015 Apr										
WORK EXPERIENCE INCLUSIVE DATES POSITION TITLE (With a fishCoord April 5,2015 Apr										
Include private embloyment. Start from your recent work Description of outlies should be indicated in the attached Work Experience abest.	V WORK	EVDEDIENCE		(Cor	ntinue on separate sheet	if necessary)				
POSITION TITLE				nt work) Descriptio	n of duties should l	be indicated in the attach	ed Work Ex		t.	l GOV I
File			POSITION TITLE	(Write in full/Do not	DEPARTMENT / AGENC			GRADE (if		SERVICE
12/5/2020 April 15,2021 Area Supervisor Area Manager 1500.00	From	То	abbreviate		full/Do		SALARY	(Format "00-0")/	APPOINTMENT	
11/12/2020 67/2021 Account Officer Rizal Bank Corporation 9800.00	April 5,2015	June 17,2015	Salesia	dy	Roma's Mo	erchandise Store	4500.00			
Confiner on apparate short of necessary)	12/5/2020	April 15,2021	Area Super	visor	Are	a Manager	15000.00			
	11/12/2020	6/7/2021	Account O	fficer	Rizal Ba	nk Corporation	9800.00			
										
										<u> </u>
					ofinus on	if necessar 1				
	SIGN	ATURE		(Col	nunue on separate sneet			June 10,2021		

VI VOLUNTARY WORK OR INVOLVEMENT I	IN CIVIC / NON COVERNMENT	/ DEODLE / V/	N LINTARY O	DCANIZATIO	M/C		
VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S INCLUSIVE DATES							
29. NAME & ADDRESS OF ORGANIZATION (Write in full))	From	(mm/dd/vvvv) To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
		ntinue on separate					
VII. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PR						
		INCLUSIVE ATTENDANCE	DATES OF		Type of LD		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENT (Write in f				NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
Breaking the Limits, Be an Effective Speaker		From 12/4/2018	To 12/4/2018	5.0	Managerial	Department of Business Management	
Youth can make a Ch	ange	3/15/2017	3/15/2017	3.0	Environmental		
Touth can make a on	ange	3/13/2017	3/13/2017	3.0	Liiviioiiiieittai	Department of Forestry	
	(Con	ntinue on separate :	sheet if necessary)				
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RE	COGNITION	(Write in full)			MEMBERSHIP IN ASSOCIATION/ORGANIZATION 33. (Write i	
Hiking						Adventist Ministry to Colleges and Universitie	
Gardening		Travel with a Purpose Ministry					
Reading	Reading					Society of Agribusiness Students	
						College of Management and Economics	
SIGNATURE	(Con	ntinue on separate	sheet if necessary)		ΔTF	lune 10 2021	

34. Are you related by consanguinity or affinity to the appointin chief of bureau or office or to the person who has immediat Bureau or Department where you will be apppointed,						
a. within the third degree?		No				
b. within the fourth degree (for Local Government Unit - Ca	reer Employees)?					
	If YES, give details:					
35. a. Have you ever been found guilty of any administrative of	No					
	If YES, give details:					
b. Have you been criminally charged before any court?		140				
, , ,	If YES, give details:					
		Date Filed:				
		Status of Case/s:				
36. Have you ever been convicted of any crime or violation of a by any court or tribunal?	iny law, decree, ordinance or regulation	No .				
5, 4, 554.00. 454.14.1		If YES, give details:				
 Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, e 		No If YES, give details:				
out (abolition) in the public or private sector?	ina or torril, illinoriou oorituustor priacou	II TES, give details.				
38. a. Have you ever been a candidate in a national or local ele	ection held within the last year (except	No				
Barangay election)?		If YES, give details:				
b. Have you resigned from the government service during t	he three (3)-month period before the last	No				
election to promote/actively campaign for a national or loca	I candidate?	If YES, give details:				
39. Have you acquired the status of an immigrant or permanen	t resident of another country?					
		If YES, give details (country):				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	and Corta for Dischlad Darsons (DA	-				
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)		No				
a. Are you a member of any indigenous group?						
		If YES, please specify:				
b. Are you a person with disability?		If YES, please specify ID No:				
c. Are you a solo parent?						
		If YES, please specify ID	No:			
41. REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)					
NAME	ADDRESS	TEL. NO. ID picture taken within the last 6 months				
Nilda Amestoso	Visca,Baybay City Leyte	9568639019	4.5 cm. X 3.5 cm (passport size)			
Geleca Igdanes	Visca, Baybay City, Leyte	9168674356				
Kenneth Opeña	Albuera Leyte		Computer generated or photocopied picture			
42. I declare under oath that I have personally accomplished	•	ie correct and	is not acceptable			
complete statement pursuant to the provisions of pertin						
Philippines. I authorize the agency head/authorized repres			RUSTO			
I agree that any misrepresentation made in this doc administrative/criminal case/s against me.	ument and its attachments shall cause	e the filing of	РНОТО			
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.:	ox)					
Date/Place of Issuance:		Right Thumbmark				
SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.						
SUBSCRIBED AND SWORN to before me this	, amant exhibi	ung mamer valluly issued gov	устипені ID аз інцісавец above.			
<u> </u>						
	:h					