

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	BATAUSA			
FIRST NAME	HEIDELIZA	NAME EXTENSION (JR., SR)		
MIDDLE NAME	ROBA			
3. DATE OF BIRTH (mm/dd/yyyy)	11/22/1975	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	TUBIGON, BOHOL	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:			
7. HEIGHT (m)	5'1	17. RESIDENTIAL ADDRESS	Block 2 Lot 15	
8. WEIGHT (kg)	60 kgs		ZIP CODE	6014
9. BLOOD TYPE	O+		18. PERMANENT ADDRESS	166 Cangcunay
10. GSIS ID NO.				House/Block/Lot No.
11. PAG-IBIG ID NO.		Purok 4		Tinangnan
12. PHILHEALTH NO.		Subdivision/Village		Barangay
13. SSS NO.	06-1570042-3	City/Municipality		Province
14. TIN NO.	200-733-679-000	19. TELEPHONE NO.		
15. AGENCY EMPLOYEE NO.		20. MOBILE NO.	09338108641	
		21. E-MAIL ADDRESS (if any)	hbatausa@gmail.com	

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	BATAUSA			
FIRST NAME	PRUDENCIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	RAFOLS			
25. MOTHER'S MAIDEN NAME				
SURNAME	ROBA			
FIRST NAME	BEATRIZ			
MIDDLE NAME	CANO		(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	CAWAYANAN ELEMENTARY SCHOOL, TUBIGON, BOHOL	ELEMENTARY EDUCATION	6/4/1982	6/10/1988		1988	
SECONDARY	HOLY CROSS ACADEMY, TUBIGON, BOHOL	SECONDARY EDUCATION	6/10/1988	6/14/1992		1992	
VOCATIONAL / TRADE COURSE							
COLLEGE	UNIVERSITY OF SAN CARLOS, CEBU CITY	UNIVERSITY EDUCATION	6/14/1992	6/18/1996		1996	
GRADUATE STUDIES	INTERNATIONAL INSTITUTE OF SOCIAL STUDIES, THE HAGUE, NETHERLANDS	MASTERS DEGREE	9/4/2000	12/14/2001		2001	NETHERLANDS FELLOWSHIP

(Continue on separate sheet if necessary)

SIGNATURE			DATE	DECEMBER 7, 2022
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#### IV. CIVIL SERVICE ELIGIBILITY

[illegible]

**(Continue on separate sheet if necessary)**

## V. WORK EXPERIENCE

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

[illegible]

*(Continue on separate sheet if necessary)*

<b>SIGNATURE</b>		<b>DATE</b>	
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S						
29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK	
		From	To			
(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 (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
(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)	
(Continue on separate sheet if necessary)						
SIGNATURE				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); and (c) Solo Parents Welfare Act of 2000 (RA 8972), 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)													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.									
NAME	ADDRESS	TEL. NO.											
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.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">           Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)  <b>PLEASE INDICATE ID Number and Date of Issuance</b> </td> </tr> <tr> <td style="padding: 2px;">Government Issued ID: _____</td> </tr> <tr> <td style="padding: 2px;">ID/License/Passport No.: _____</td> </tr> <tr> <td style="padding: 2px;">Date/Place of Issuance: _____</td> </tr> </table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) <b>PLEASE INDICATE ID Number and Date of Issuance</b>	Government Issued ID: _____	ID/License/Passport No.: _____	Date/Place of Issuance: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 100px; vertical-align: bottom; padding: 5px;">           Signature (Sign inside the box)         </td> </tr> <tr> <td style="padding: 5px;">Date Accomplished _____</td> </tr> </table>	Signature (Sign inside the box)	Date Accomplished _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; padding: 10px;">           ID picture taken within the last 6 months            4.5 cm. X 3.5 cm            (passport size)             Computer generated or photocopied picture is not acceptable         </td> </tr> <tr> <td style="text-align: center; padding: 5px;">PHOTO</td> </tr> <tr> <td style="height: 100px; vertical-align: bottom; padding: 5px;">           Right Thumbmark         </td> </tr> </table>	ID picture taken within the last 6 months 4.5 cm. X 3.5 cm (passport size)  Computer generated or photocopied picture is not acceptable	PHOTO	Right Thumbmark		
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SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.													
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