

## 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	LABRADOR		
FIRST NAME	SHEKENA	NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	URATE		
3. DATE OF BIRTH (mm/dd/yyyy)	07/29/1997	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	MUNTINLUPA CITY	If holder of dual citizenship, please indicate the details.	N/A
5. SEX	<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	N/A SENTRO House/Block/Lot No. Street N/A UNION Subdivision/Village Barangay MAHAPLAG LEYTE City/Municipality Province 6512
7. HEIGHT (m)	1.52		
8. WEIGHT (kg)	56	ZIP CODE	
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	N/A SENTRO House/Block/Lot No. Street N/A UNION Subdivision/Village Barangay MAHAPLAG LEYTE City/Municipality Province 6512
10. GSIS ID NO.	N/A	ZIP CODE	
11. PAG-IBIG ID NO.	1212-5179-2847		
12. PHILHEALTH NO.	21-025661760-3		
13. SSS NO.	06-4602789-0	19. TELEPHONE NO.	N/A
14. TIN NO.	390-828-329	20. MOBILE NO.	0963-640-8718
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	labradoreshekena@gmail.com

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	LABRADOR		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	JOEY	NAME EXTENSION (JR., SR) N/A	SHEIAN DEVINE URATE CASTRO	08/16/2015
MIDDLE NAME	MANGMANG		SHON JEO URATE LABRADOR	08/08/2024
OCCUPATION	SEAFARER			
EMPLOYER/BUSINESS NAME	ELWIN CREW MANAGEMENT INC.			
BUSINESS ADDRESS	1004 QUIRINO AVE, MALATE,METRO MANILA			
TELEPHONE NO.	0253103201			
24. FATHER'S SURNAME	URATE			
FIRST NAME	STEVEN	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	ARGONCILLO			
25. MOTHER'S MAIDEN NAME				
SURNAME	PICORRO			
FIRST NAME	SARAH			
MIDDLE NAME	MANAGBANAG			

(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	LA PAZ ELEMENTARY SCHOOL	PRIMARY EDUCATION	2003	2009	GRADUATED	2009	ACADEMIC EXCELLENCE
SECONDARY	MAHAPLAG NATIONAL HIGH SCHOOL	HIGH SCHOOL	2009	2013	GRADUATED	2013	ACADEMIC EXCELLENCE
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	GRADUATED	N/A	N/A
COLLEGE	ACCESS COMPUTER COLLEGE	ASSOCIATES DEGREE IN COMPUTER SCIENCE	2017	2019	GRADUATED	2019	ACADEMIC EXCELLENCE, BEST IN WEB
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE


DATE

JULY 20, 2025

[illegible]

**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>	JULY 20, 2025

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	UNION FARMERS ASSOCIATION	06/01/2023	PRESENT	N/A	SECRETARY
	YOUTH FOR CHRIST	05/22/2024	PRESENT	N/A	MEMBER

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

[illegible]

VIII. OTHER INFORMATION

4. OTHER INFORMATION		
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
RESEARCHING AND TROUBLE SHOOTING INFORMATION	BEST IN WEB DESIGN	N/A
ASSISTING PEOPLE	BEST IN THESIS	
ORGANIZING TASKS	BEST IN SALES GROWTH	
GARDENING		
CARING FOR PETS		

<b>SIGNATURE</b>		<b>DATE</b>	<b>JULY 20, 2025</b>
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**JULY 20, 2025**

34.	Are you related by consanguinity or affinity to the appointing or recommending chief of bureau or office or to the person who has immediate supervision over you in 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 checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" 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 checked="" type="checkbox"/> NO If YES, give details: _____  <input type="checkbox"/> YES <input checked="" 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 checked="" 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 checked="" 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 checked="" type="checkbox"/> NO If YES, give details: _____  <input type="checkbox"/> YES <input checked="" 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 checked="" 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 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 checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" 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>PEDRO DADULA BIAGCONG</td> <td>POBLACION MAHAPLAG LEYTE</td> <td>0905-7043099</td> </tr> <tr> <td>ANJIE APILA PICORRO</td> <td>UNION MAHAPLAG LEYTE</td> <td>0946-5093461</td> </tr> <tr> <td>CRISTY TURTOSA DE PAZ</td> <td>SAN VICENTE MAHAPLAG LEYTE</td> <td>0997-8550178</td> </tr> </tbody> </table>			NAME	ADDRESS	TEL. NO.	PEDRO DADULA BIAGCONG	POBLACION MAHAPLAG LEYTE	0905-7043099	ANJIE APILA PICORRO	UNION MAHAPLAG LEYTE	0946-5093461	CRISTY TURTOSA DE PAZ	SAN VICENTE MAHAPLAG LEYTE	0997-8550178
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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 colspan="2" style="padding: 2px;">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td style="width: 40%; padding: 2px;">Government Issued ID:</td> <td style="padding: 2px;">PASSPORT</td> </tr> <tr> <td style="padding: 2px;">ID/License/Passport No.:</td> <td style="padding: 2px;">P4513488C</td> </tr> <tr> <td style="padding: 2px;">Date/Place of Issuance:</td> <td style="padding: 2px;">TACLOBAN CITY</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:	PASSPORT	ID/License/Passport No.:	P4513488C	Date/Place of Issuance:	TACLOBAN CITY	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 80px; text-align: center; vertical-align: middle;"> </td> </tr> <tr> <td style="padding: 2px; text-align: center;">Signature (Sign inside the box)</td> </tr> <tr> <td style="padding: 2px; text-align: center;">July 20, 2025</td> </tr> <tr> <td style="padding: 2px; text-align: center;">Date Accomplished</td> </tr> </table>		Signature (Sign inside the box)	July 20, 2025	Date Accomplished	<div style="text-align: center;">         PHOTO     </div> <div style="text-align: center; margin-top: 20px;">         Right Thumbmark     </div>
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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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