

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	BARREDO		
FIRST NAME	JAKE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	AGBON		
3. DATE OF BIRTH (mm/dd/yyyy)	May 2, 1990	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	Palo Maternity, Palo, Leyte	If holder of dual citizenship, please indicate the details.	
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	House/Block/Lot No. Street Zone 2 Guindapunan Subdivision/Village Barangay Palo Leyte City/Municipality Province
7. HEIGHT (m)	1.63	ZIP CODE	6501
8. WEIGHT (kg)	65		
9. BLOOD TYPE	O+	18. PERMANENT ADDRESS	House/Block/Lot No. Street Zone2 Guindapunan Subdivision/Village Barangay Palo Leyte City/Municipality Province
10. GSIS ID NO.	none	ZIP CODE	6501
11. PAG-IBIG ID NO.	none		
12. PHILHEALTH NO.	none		
13. SSS NO.	none	19. TELEPHONE NO.	none
14. TIN NO.	none	20. MOBILE NO.	0995-913-7091
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	jakebarredo143@gmail.com/joyceagbon@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Amparo	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Mae Joy	NAME EXTENSION (JR., SR)	John Kennedy A. Barredo January 14, 2019
MIDDLE NAME			Chandrea Mae A. Barredo March 7, 2022
OCCUPATION	Housewife		
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME	Barredo		
FIRST NAME	Dionedes (+)	NAME EXTENSION (JR., SR)	
MIDDLE NAME	Armerola		
25. MOTHER'S MAIDEN NAME	Memar A. Agbon		
SURNAME	Barredo		
FIRST NAME	Memar		
MIDDLE NAME	Agbon		

(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	Guindapunan Elementary School		1996	2002		2002	2nd Honorable Mention
SECONDARY	Palo National High School		2002	2006		2006	
VOCATIONAL / TRADE COURSE							
COLLEGE	EVSU Main Campus	Bachelor of Science in Marketing	2006	2014		2014	
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	September 19, 2025
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[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.

22	INCLUSIVE DATES				SALARY/ JOB/ PAY		
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[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	September 19, 2025
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[illegible]





VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)

[illegible]

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Guitar Playing				
	Cooking				
	Singing				

SIGNATURE		DATE	September 19, 2025
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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>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: Alpha Insurance Manager is my younger brother</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: Date Filed: _____ 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 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>	<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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>Junjay Billones</td> <td>Brgy. Apitong Tacloban City</td> <td>09338691232</td> </tr> <tr> <td>Judith Sudario</td> <td>Poblacion, Dagami Leyte</td> <td>09567182172</td> </tr> <tr> <td>Jane Nacario</td> <td>Tacloban City</td> <td>09541992902</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Junjay Billones	Brgy. Apitong Tacloban City	09338691232	Judith Sudario	Poblacion, Dagami Leyte	09567182172	Jane Nacario	Tacloban City	09541992902
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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>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td>PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID: Drivers License</td> </tr> <tr> <td>ID/License/Passport No.: H02-15-005619</td> </tr> <tr> <td>Date/Place of Issuance: LTO Tacloban City/2015</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: Drivers License	ID/License/Passport No.: H02-15-005619	Date/Place of Issuance: LTO Tacloban City/2015	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">  Signature (Sign inside the box) September 19, 2025 Date Accomplished </td> </tr> </table>	 Signature (Sign inside the box) September 19, 2025 Date Accomplished						
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<div style="text-align: right;">  PHOTO </div> <div style="border: 1px solid black; height: 100px; width: 100%; margin-top: 10px;"></div> <div style="text-align: right; margin-top: 5px;">Right Thumbmark</div>													
<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> <p style="text-align: center;">Person Administering Oath</p>													

WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

- Duration: 2009 – present / 2019-present
- Position: Insurance Agent, Typist / Insurance Agent
- Name of Office/Unit: n/a
- Immediate Supervisor: Emerita Delute (Insurance Broker)/Jerome A. Barredo (Branch Manager)
- Name of Agency/Organization and Location: Milestone Insurance / Alpha Insurance
 - Summary of Actual Duties

- Gathers the necessary documents from the client
- Explains the importance/coverage of insurance
- Type or encode the necessary details in hardcopy form COC, POLICY
- Follow up the authentication of COC
- Gathers the documents in case of claims, forwards the documents to the in-charge
- Travels to areas of Samar and Leyte for processing of claims and marketing purposes
- Performs other duties that may be assigned


JAKE A. BARREDO

(Signature over Printed Name
of Employee/Applicant)

Date: September 19, 2025