

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	CAJA		
FIRST NAME	ANTHEA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	AMAGA		
3. DATE OF BIRTH (mm/dd/yyyy)	4.18.1992	16. CITIZENSHIP	FILIPINO
4. PLACE OF BIRTH	MERIDA , LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	FEMALE		
6 CIVIL STATUS	MARRIED		
7. HEIGHT (m)	1.6002	17. RESIDENTIAL ADDRESS	N/A House/Block/Lot No. Street SITIO ISABEL PLARIDEL Subdivision/Village Barangay HINUNDAYAN SOUTHERN LEYTE City/Municipality Province
8. WEIGHT (kg)	72	ZIP CODE	6609
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS	N/A House/Block/Lot No. Street SITIO ISABEL PLARIDEL Subdivision/Village Barangay HINUNDAYAN SOUTHERN LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6609
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	N/A		
13. SSS NO.	06-4682420-0	19. TELEPHONE NO.	N/A
14. TIN NO.	N/A	20. MOBILE NO.	09474839370
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	a.caja100714@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	CAJA		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	CARLO	NAME EXTENSION (JR., SR)	KHARLA ELIZABETH A. CAJA	3.16.2016
MIDDLE NAME	PETAGARA		ELLIANA GRACE A. CAJA	1.27.2022
OCCUPATION	ASSISTANT CASHIER		JANE ELOUISE A. CAJA	11.24.2024
EMPLOYER/BUSINESS NAME	JM POULTRY AND LIVESTOCK SUPPLY INC.			
BUSINESS ADDRESS	CANSAGA CONSULACION, CEBU			
TELEPHONE NO.	032-423-5545			
24. FATHER'S SURNAME	N/A			
FIRST NAME	N/A	NAME EXTENSION (JR., SR)		
MIDDLE NAME	N/A			
25. MOTHER'S MAIDEN NAME	DECEASED			
SURNAME	AMAGA			
FIRST NAME	RUFILLA			
MIDDLE NAME	MAHAYAG		(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	LIBAS ELEMENTARY SCHOOL					2004	
SECONDARY	MERIDA VOCATIONAL SCHOOL					2008	
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	EASTERN SAMAR STATE UNIVERSITY	BS BIOLOGY MAJOR IN CONSERVATION BIOLOGY				2022	
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	03/17/2025
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[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]

SIGNATURE		DATE	03/17/2025
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

[illegible][illegible]

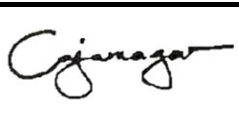
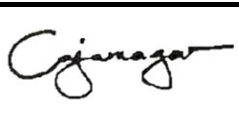
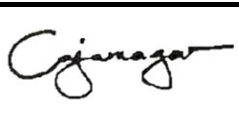
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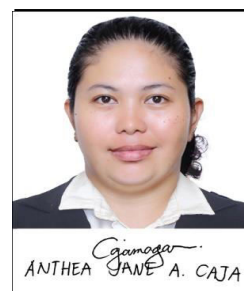
VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
CROCHET	N/A	N/A
READING NON-FICTION BOOKS		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	03/17/2025
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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>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>	<p>If YES, give details:</p> <hr/> <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>	<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>	<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>	<p>If YES, give details: _____</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>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>	<p>If YES, please specify: _____</p> <p>If YES, please specify ID 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: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>MS. RUBIE P. CUENCO</td> <td>BRGY. PLARIDEL, HINUNDAYAN, SOUTHERN LEYTE</td> <td>9692385357</td> </tr> <tr> <td>MS. MICHELE SEQUINA</td> <td>BRGY. PLARIDEL, HINUNDAYAN, SOUTHERN LEYTE</td> <td>9776427635</td> </tr> <tr> <td>DOC. SYRENE P. NAYRE</td> <td>BRGY. LIBAS, MERIDA, LEYTE</td> <td>N/A</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	MS. RUBIE P. CUENCO	BRGY. PLARIDEL, HINUNDAYAN, SOUTHERN LEYTE	9692385357	MS. MICHELE SEQUINA	BRGY. PLARIDEL, HINUNDAYAN, SOUTHERN LEYTE	9776427635	DOC. SYRENE P. NAYRE	BRGY. LIBAS, MERIDA, LEYTE	N/A	
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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>														
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PHOTO

Right Thumbmark