

# 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	POLIQUIT		
FIRST NAME	MARIA ARIES	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ORTEGA		
3. DATE OF BIRTH (mm/dd/yyyy)	04/12/1982	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	PARAÑAQUE CITY	If holder of dual citizenship, please indicate the details.	
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	House/Block/Lot No. _____ Street _____ PUROK 2 _____ BRGY. STA. CRUZ Subdivision/Village _____ Barangay _____ BAYBAY LEYTE _____ LEYTE City/Municipality _____ Province _____ ZIP CODE 6521
7. HEIGHT (m)	1.52	18. PERMANENT ADDRESS	House/Block/Lot No. _____ Street _____ PUROK 2 _____ BRGY. STA. CRUZ Subdivision/Village _____ Barangay _____ BAYBAY LEYTE _____ LEYTE City/Municipality _____ Province _____ ZIP CODE 6521
8. WEIGHT (kg)	54		
9. BLOOD TYPE	A		
10. GSIS ID NO.			
11. PAG-IBIG ID NO.	1210-4131-2763		
12. PHILHEALTH NO.	01-025365423-1		
13. SSS NO.	06-3563085-8	19. TELEPHONE NO.	
14. TIN NO.	382-102-292-000	20. MOBILE NO.	09156505743
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	<a href="mailto:mariaaries.poliquit@vsu.edu.ph">mariaaries.poliquit@vsu.edu.ph</a>

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	POLIQUIT		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	JOSE	NAME EXTENSION (JR., SR)	KAYE ANGELINE POLIQUIT	08/07/2005
MIDDLE NAME	ORACION			
OCCUPATION	SELF EMPLOYED			
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	ORTEGA			
FIRST NAME	BENITO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	CANO			
25. MOTHER'S MAIDEN NAME				
SURNAME	AVELLANA			
FIRST NAME	LOLITA			
MIDDLE NAME	DELANTAR		(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	LYCEE D' REGIS MARIE	ELEMENTARY	1990	1996		1996	Graduate With Distinction
SECONDARY	PARAÑAQUE SCIENCE HIGH SCHOOL	SECONDARY	1996	1999		1999	
VOCATIONAL / TRADE COURSE							
COLLEGE	ADAMSON UNIVERSITY	BS IN ACCOUNTANCY	2007	2011		2011	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MM - BUSINESS MANAGEMENT	2017	Present	On-going		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	6/29/2022
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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						
(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)						
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			
	Applying Analytical Procedures in Financial Statements Audits	11/12/2021	11/12/2021	2.0	Technical	National Institute of Accounting Technician
	Common Payroll Issues Every Accountants Should Know and How to correct them	11/12/2021	11/12/2021	2.0	Technical	National Institute of Accounting Technician
	Expanded Withholding Tax Rules for Big and Small Taxpayers	11/12/2021	11/12/2021	2.0	Technical	National Institute of Accounting Technician
	Managing Cash and Working Capital Through the Crisis	11/12/2021	11/12/2021	2.0	Technical	National Institute of Accounting Technician
	Managing Stress in the Workplace	11/12/2021	11/12/2021	2.0	Technical	National Institute of Accounting Technician
	Taxpayer Remedies on BIR Audits	11/12/2021	11/12/2021	2.0	Technical	National Institute of Accounting Technician
	Update and Clarifications on CREATE Law	11/12/2021	11/12/2021	2.0	Technical	National Institute of Accounting Technician
	Professional Certificate in Excel Pivot Table	10/26/2021	10/28/2021	8.0	Technical	National Institute of Accounting Technician
	Government Procurement Law	1/31/2022	1/31/2022	5.0	Technical	Real Excellence Review Center
	Management Advisory Services: Variance Analysis	03/01/2022	03/01/2022	5.0	Technical	Real Excellence Review Center
	Post-Employment Benefits	03/21/2022	03/21/2022	5.0	Technical	Real Excellence Review Center
	Select Tax Issues Needing Academic or Practical Consensus	04/03/2022	04/03/2022	5.0	Technical	Real Excellence Review Center
	Webinar on Intermediate Accounting: Receivables	04/12/2022	04/12/2022	5.0	Technical	Real Excellence Review Center
(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)	
	PROFICIENT IN MS APPLICATIONS					
	PROFICIENT IN E-NGAS APPLICATION					
	PROFICIENT IN SAP APPLICATIONS					
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	6/29/2022	

<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 type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</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: _____</p> <p>Date Filed: _____</p> <p>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>When I ended my Contract of Service with BFAR _____</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: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>LINA F. ZULUETA, CPA</td> <td>BFAR-CENTRAL OFFICE</td> <td>0998-435-9273</td> </tr> <tr> <td>LORELEI S. DATU, CPA</td> <td>COA - GAS</td> <td>0942-018-0786</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	LINA F. ZULUETA, CPA	BFAR-CENTRAL OFFICE	0998-435-9273	LORELEI S. DATU, CPA	COA - GAS	0942-018-0786			
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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.) PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID: <b>UMID</b></td> </tr> <tr> <td>ID/License/Passport No.: <b>011-1405-2027-4</b></td> </tr> <tr> <td>Date/Place of Issuance: <b>5/24/2021</b></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: <b>UMID</b>	ID/License/Passport No.: <b>011-1405-2027-4</b>	Date/Place of Issuance: <b>5/24/2021</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 40px;">Signature (Sign inside the box)</td> </tr> <tr> <td style="text-align: center;">6/29/2022</td> </tr> <tr> <td style="text-align: center;">Date Accomplished</td> </tr> </table>	Signature (Sign inside the box)	6/29/2022	Date Accomplished					
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<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p>ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size)</p> <p>With full and handwritten name tag and signature over printed name</p> <p>Computer generated or photocopied picture is not acceptable</p> </div> <p style="text-align: center;">PHOTO</p> <div style="border: 1px solid black; height: 100px; width: 100%; margin-top: 10px;"></div> <p style="text-align: center;">Right Thumbmark</p>													
<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: 200px; height: 60px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>													