cs	Form	No.	212
Rev	ricad or	117	

PERSONAL DATA SHEET

READ THE ATTACHED GUIDE	E TO FILLING OUT THE PERSONAL DATA S is () and use separate sheet if necessary. Indic	HEET (PDS) BEFORE ACCOMPLE ate N/A if not applicable. DO NOT Al	JSHING THE BBREVIATE.	PDS FOR	1. CS ID No.		(Do not fill up.	For CSC use on	
PERSONAL INFORMATION		ate N/A ii not applicable. Bo No 174		VIC.					
2. SURNAME	GONZAGA						, con		
FIRST NAME	SHEILA MARIE				NAME EXTENSION (JR	c, sry			
MIDDLE NAME			712-02-0						
3. DATE OF BIRTH	NOVEMBER 4,1995	16. CITIZENSHIP		☑ Filip	pino 🗆	Dual Citizenship			
(mm/dd/yyyy)	NOTE III DELITING	NOVEMBER 4,1995		□by birth □by naturalization				ation	
4. PLACE OF BIRTH	MINGLANILLA CEBU CITY					Pls. indicate	country:		
5. SEX	☐ Male ☑ Female	please indicate the det	ails.					•	
	☑ Single ☐ Married	17. RESIDENTIAL ADDRESS	Н	ouse/Block/Lo	ot No.		ZONE 1 Street		
6 CIVIL STATUS	☐ Widowed ☐ Separated						PATAG Barangay		
	☐ Other/s:	-	Subdivision/Village BAYBAY				LEYTE		
7. HEIGHT (m)	152.4		City/Municipality		6521	Province			
8. WEIGHT (kg)	53	ZIP CODE					ZONE 1		
9. BLOOD TYPE	AB+	18. PERMANENT ADDRESS	Но	ouse/Block/Lo	t No.		Street PATAG		
IO. GSIS ID NO.	N/A		S	ubdivision/Vil			Barangay LEYTE Province		
	N/A			BAYBA City/Municipa					
1. PAG-IBIG ID NO.	denominal denomination of the second	ZIP CODE		6521					
2. PHILHEALTH NO.	N/A	19. TELEPHONE NO.				N/A			
3. SSS NO.	N/A								
4. TIN NO.	723-333-749	723-333-749 20. MOBILE NO.					9380380782		
5. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	gonzagasheilamarie05@g				nail.com		
. FAMILY BACKGROUND							Laure or ou	DTI (
2. SPOUSE'S SURNAME	N/A		23. NAME of Ch	HILDREN (W	rite full name and	d list all)	A SOUTH AND THE	RTH (mm/dd/yy	
FIRST NAME	N/A	NAME EXTENSION (JR., SR)					-	N/A	
MIDDLE NAME	N/A								
OCCUPATION	N/A						-		
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
4. FATHER'S SURNAME	N/A								
FIRST NAME	N/A	NAME EXTENSION (JR., SR)							
MIDDLE NAME	N/A								
5. MOTHER'S MAIDEN NAME									
SURNAME	GONZAGA								
FIRST NAME	MA. TERES	A							
MIDDLE NAME	JURISNA		(Continue on separate sheet if necessary)						
III. EDUCATIONAL BACKG	ROUND								
26.	NAME OF SCHOOL	BASIC EDUCATION/DEGREE	COURSE	PERIOD C	OF ATTENDANCE	HIGHEST LEVEU UNITS EARNED	YEAR	SCHOLARSH ACADEMIC	
LEVEL	(Write in full)	(Write in full)		From	То	(if not graduated)	GRADUATED	HONORS RECEIVED	
ELEMENTARY	PATAG ELEMENTARY SCHOOL	PRIMARY EDUCATION		2002	2008	N/A	2008	WITH	
SECONDARY	VSU LABORATORY HIGHSCHOOL	HIGHSCHOOL		2008	2012	N/A	2012	N/A	
VOCATIONAL /	NIA	N/A		N/A	N/A	N/A	N/A	N/A	
TRADE COURSE COLLEGE	STO. NIÑO COLLEGE OF ORMOC	BACHELOR OF SCIENCE IN CR	IMINOLOGY	2013	2017	N/A	2017	N/A	
GRADUATE STUDIES	N/A	NA		N/A	N/A	N/A	N/A	AND THE RESERVE OF THE PERSON	
GRADUATE STUDIES	NIA	MA.		-	100	THE STATE OF THE S	INA	N/A	

. CIVIL SE	ERVICE ELIGI	BILITY			We have the	7 38 6		S CONTRACT	
CARE	ER SERVICE/RA 1	080 (BOARD/ BAR) UNDER	RATING	DATE OF				LICENSE (if ap	plicable)
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity	
	DRIVER LI	CENSE		11/4/2018	BAYBAY CITY		H12-17-001875	11/4/203	
PRC(CRIMINOLOGIST)		75.5	2/01/2018	TACLOBAN CITY			0153940	11/4/2025	
	SK CHAIRF	PERSON		05/30/2018	118 BAYBAY CITY				UP TO
	EXPERIENCE			ntinue on separate sheet					
. INCL	USIVE DATES mm/dd/yyyy)	POSITION 1 (Write in full/Do not	TITLE	DEPARTMENT / AG	e indicated in the attache ENCY / OFFICE / COMPANY II/Do not abbreviate)	MONTHLY SALARY	SALARYI JOBI PAY GRADE (# applicable)& STEP	STATUS OF APPOINTMENT	GOVT
From	То	10					(Format '00-0') INCREMENT	AC 3.5	(4/14)
30/2018	PRESENT	SANGGUNIANG KABATA	AN CHAIRPERSON	LOCAL GO	VERNMENT UNIT	6275.00		ELECTED	Y
				-		-			
				-					
			1						
			849 10	ontinue on separate shee	(if necessary)	1 March			

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/ PEOPLE / V	OLUNTARY C	ORGANIZATION	US	
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS		POSITION / NATURE OF WORK
KABATAAN KONTRA DROGA AT TERRORISMO	(KK2DAT)	10/13/2020	PRESENT	N/A	TREASURER	
				-		
						*
			sheet if necessary	v)		
VII. LEARNING AND DEVELOPMENT (L&D) (Start from the most recent L&D)training program and include	INTERVENTIONS/TRAINING PR to only the relevant L&D/training taken for the	to last five (5) year	rs for Division Chic	el Executivo Manage	rial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT INTI (Write in ful	ERVENTIONS/TRAINING PROGRAMS	INCLUSIV ATTE	PEDATES OF INDANCE (Idd/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
PROTOCOLS IN INTELLIGENCE AND INVESTIGATION	ĺ	9/12/2020	09/13/2020	16.0		CRIMINAL INVESTIGATION AND FORENSIC SCIENCE ACADEMY
UNDERCOVER OPERATION AND BACK		9/19/2020	9/20/2020	16.0		CRIMINAL INVESTIGATION AND FORENSIC SCIENCE ACADEMY
CRIMINAL LAWS AND JURI		9/26/2020	9/27/2020	16.0		CRIMINAL INVESTIGATION AND FORENSIC SCIENCE ACADEMY
REVISED RULLES ON CRIMINAL PROC	1011100 × _1027470000	10/3/2020	10/4/2020	16.0		CRIMINAL INVESTIGATION AND FORENSIC SCIENCE ACADEMY
CRIME SCENE INVESTIGATION AND EV		10/17/2020	10/18/2020	16.0		CRIMINAL INVESTIGATION AND FORENSIC SCIENCE ACADEMY
INTRODUCTION TO FRAUD AND MODUS OPE		10/24/2020	10/25/2020	16.0		CRIMINAL INVESTIGATION AND FORENSIC SCIENCE ACADEMY
TERRORISM AND ORGANIZED CRI		11/7/2020	11/8/2020	16.0		CRIMINAL INVESTIGATION AND FORENSIC SCIENCE ACADEMY
COGNITIVE INTERVIEWING		11/14/2020	11/15/2020	16.0		CRIMINAL INVESTIGATION AND FORENSIC SCIENCE ACADEMY
0001111121111						
	(Cont	inue on separate	sheet if necessary)		
VIII. OTHER INFORMATION						
31. SPECIAL SKILLS and HOBBIES	32. NON-		NCTIONS / RECOG to in full)	SNITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
CERTIFIED CRIMINAL INVESTIGATOR		N/A	1			KABATAAN KONTRA KRIMEN DROGA AT TERRORISMO(KK2DAT)
DRIVING						
COOKING						
LEADERSHIP SKILLS, MANAGEMENT SKILLS					43	
LITERATE COMPUTER						
PLAYING BASKETBALL						
INTERPERSONAL, PROBLEM SOLVING	-					
		inua on separate :	sheet if necessary)			March m. ama
SIGNATURE	1700			n _A	TF	March 06.2023

- Lander visit and the second						
34. Are you related by consanguinity or affinity to the appointing of						
chief of bureau or office or to the person who has immediate s						
Bureau or Department where you will be apppointed,		☐ YES ☑ N				
a. within the third degree?		YES NO				
b. within the fourth degree (for Local Government Unit - Caree	ar Employees)?	The state of the s	0			
	If YES, give details:					
35. a. Have you ever been found guilty of any administrative offer	nse?	□ YES ☑ N	40			
		If YES, give details:				
		8				
1 11 1		☐ YES ☑	NO			
b. Have you been criminally charged before any court?		If YES, give details:	500			
		Date Filed:				
		Status of Case/s:				
36. Have you ever been convicted of any crime or violation of any	y law, decree, ordinance or regulation by	☐ YES ☑] NO			
any court or tribunal?		If YES, give details:	. 1177-0			
37. Have you ever been separated from the service in any of the	following modes: resignation,	☐ YES ☑] NO			
retirement, dropped from the rolls, dismissal, termination, end	of term, finished contract or phased out					
(abolition) in the public or private sector?						
38. a. Have you ever been a candidate in a national or local elect	tion held within the last year (except	☐ YES	☑ NO			
Barangay election)?		If YES, give details:				
b. Have you resigned from the government service during the	three (3)-month period before the last	☐ YES	☑ NO			
election to promote/actively campaign for a national or local c		If YES, give detāils:				
39. Have you acquired the status of an immigrant or permanent re	esident of another country?	☐ YES	☑ NO			
38, 11010 / 00 004	90	If YES, give details (c				
		- Control				
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magn	na Carta for Disabled Persons (RA					
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), p	please answer the following items:					
a. Are you a member of any indigenous group?			□ NO			
20.20.20.20.20.2		If YES, please specify:				
b. Are you a person with disability?		☐ YES If YES, please specify ID	☑ NO O No:			
1		YES	✓ NO			
c. Are you a solo parent?		If YES, please specify ID	10 TO THE RESERVE OF THE PARTY			
41. REFERENCES (Person not related by consanguinity or affinity to applicant /a	appointee)					
NAME	ADDRESS	TEL. NO.				
THE WOLLD'S OF THE STATE OF THE	BRGY.BUBON BAYBAY CITY LEYTE	09684130270	ID picture taken within the last 6 months			
MARK MICHAEL O. UNLU-CAY SK FEDERATION PRESIDENT			3.5 cm. X 4.5 cm (passport size)			
HON. ALLAN P. GUMBA BRGY. CAPTAIN	BRGY. PATAG BAYBAY CITY LEYTE	09677704775	With full and handwritten name tag and signature over			
GINA ABANERA BRGY. SECRETARY	BRGY. PATAG BAYBAY CITY LEYTE	09317285330	printed name			
42. I declare under oath that I have personally accomplished	this Personal Data Sheet which is a t	rue, correct and	Computer generated			
complete statement pursuant to the provisions of pertiner	nt laws, rules and regulations of the	Republic of the	or photocopied picture is not acceptable			
Philippines. I authorize the agency head/authorized represent agree that any misrepresentation made in this document	nent and its attachments shall caus	the filing of	PHOTO			
administrative/criminal case/s against me.	TOTAL WIND THE CHARLES STEEL SELECT	o dio liang c.				
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)			***			
PLEASE INDICATE ID Number and Date of Issuance	Cost	1	Y.			
Government Issued ID: PRC						
ID/License/Passport No.: 0153940	oox)					
Date/Place of Issuance: 02/01/2018 TACLOBAN CITY						
Date: Laco or resource.		Right Thumbmark				
SUBSCRIBED AND SWORN to before me this	FEB 2023 , affiant exhibit	ting his/her validly issued or	overnment ID as indicated above.			
SODSUNIDED AND STICKEN IN DAILOUGH HIS	//	ing marter raidiy resect go	Wolffindit is to moroton accirc.			
	M.					
	ATTY RYSAN C. GUMNOCOR					
	VSU Offer Legal Officer					

Person Administering Oath