PERSONAL DATA SHEET

WARNING: Any misinterpretation 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 separ heet 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 Ramoneda NAME EXTENSION (JR., SR) FIRST NAME Sherlyn MIDDLE NAME Otida 3. DATE OF BIRTH 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/yyyy) 01/21/97 by bir by naturalization Pls. indicate country: 4. PLACE OF BIRTH **Baybay Leyte** If holder of dual citizenship please indicate the details. ☐ Male 5. SEX √ Female Philippines ✓ Single ■ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS Centro ☐ Widowed ☐ Separated House/Block/Lot No. Street Hibunawan Other/s: Subdivision/Village Barangay Baybay City, Leyte 151 cm 7. HEIGHT (m) City/Municipality Province 8. WEIGHT (kg) 54 kg ZIP CODE 6521 18. PERMANENT ADDRESS Centro 9. BLOOD TYPE House/Block/Lat No. Street Hibunawan 10. GSIS ID NO. N/A Subdivision/Village Barangay Baybay City, Leyte 11. PAG-IBIG ID NO. 1212-0965-5484 City/Municipality Province 12. PHILHEALTH NO 13-025480766-5 ZIP CODE 6521 N/A N/A 13. SSS NO 19. TELEPHONE NO. 14. TIN NO. 707-906-748 20. MOBILE NO. 09353022325 N/A 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) sherlynramoneda@gmail.com FAMILY BACKGROUND 22. SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) N/A FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME **BUSINESS ADDRESS** TELEPHONE NO. FATHER'S SURNAME Ramoneda NAME EXTENSION (JR., SR) FIRST NAME Sherwin MIDDLE NAME Israel 25. MOTHER'S MAIDEN NAME SURNAME Otida FIRST NAME Lucilyn MIDDLE NAME Lasquite (Continue on separate sheet if necessary) III. EDUCATIONAL BACKGROUND 26. PERIOD OF ATTENDANCE BASIC NAME OF SCHOOL YFAR LEVEL EDUCATION/DEGREE/COURSE GRADUATED (Write in full) (Write in full) From То Hibunawan Elem. School **ELEMENTARY Primary Education** 2009 2009 2003 SECONDARY **Baybay National High School** Junior High School 2009 2013 2013 Natinal Certificate III in VOCATIONAL / **ACLC College of Ormoc** August 2019 Setember 2019 2019 TRADE COURSE Bookkeeping COLLEGE Visayas State University **BS** in Agribusiness 2013 2017 2017 Saint Michael College of Hindang **Professional Education** June 2018 November 2018 N/A 19 N/A **GRADUATE STUDIES** essary) (Continue on separate sheet if ne **SIGNATURE** DATE CR~ 7/15/2020

IV. CIVIL	SERVICE ELI	IGIBILITY							
27. CARE	ER SERVICE/ RA	1080 (BOARD/ BAR) UNDER	DATING	DATE OF				LICENSE (if a	pplicable)
CDECIAL LAWELCECLOSEE			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity
Liscensed Professional Teacher			75.0	March 24, 2019	Tacloban City			1785169	1/21/22
				(0					
V. WORK	EXPERIENC			(Continue on separate si	neet it necessary)				
			cent work) Descri	ption of duties shoul	ld be indicated in the attache	d Work Expe	erience sheet.		
28. INCLUSIVE DATES (mm/dd/yyyy) POSITION T (Write in full/Do not		TITLE	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)	
From 06/17/19	To 01/11/2020	Secreta	ry	FIRMVEL Gas Station		P 7, 750.00		Temporary	N
08/23/17				Department of Veterinary Medicine Visayas		P 6, 000.00		Contractual	Y
				St	ate Univerty	,			•
				(Continue on separate si	heet if necessary)				
SIGN	ATURE	ERm.			DATE		07/15/2	2020 FORM 212 (Revised 20	017) Daga 2 of 1
							CS	−urivi z1z (revised 20	711), rage 2 01 4

VI. V	OLUNTARY WORK OR INVOLVEMENT I	N CIVIC / NON	I-GOVERNME	NT / 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	То				
		·	nue on separate sl				
	LEARNING AND DEVELOPMENT (L&D) I						
(Start from the most recent L&D/training program and includ		e only the relevant L&D/training taker		i for the last five (5)) years for Division Chief/Executive/Managerial positions) Type of LD		
30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS	ATTENDANCE (mm/dd/vvvv)		NUMBER OF HOURS	(Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
	(Write in full)	From	То		Technical/etc)		
	Training in NC III Bookkeeping	02/08/2019	23/09/2019	292	Technical	ACLC College of Ormoc	
		(Conti	nue on separate sl	neet if necessary)			
VIII.	OTHER INFORMATION						
31.	SPECIAL SKILLS and HOBBIES	NON-		NCTIONS / RECOG	NITION	MEMBERSHIP IN 33. ASSOCIATION/ORGANIZATION (Write in full)	
	Bookkeeping Skills	National Certificate III			N/A		
	Computer Skills N/A						
		N/A					
	Cooking Skills			****			
			nue on separate sl				
	SIGNATURE	CR.	~ .	I D∕	A <i>TE</i>	7/15/2020	

34.	Are you related by consanguinity or affinity to the appointing or rechief of bureau or office or to the person who has immediate supe Bureau or Department where you will be apppointed,						
	a. within the third degree?	☐ YES ☑ NO					
	b. within the fourth degree (for Local Government Unit - Career Er	mployees)?	☐ YES ☑ NO				
			If YES, give details:				
35	a. Have you ever been found guilty of any administrative offense?)	☐ YES ☑ NO				
00.	gany or any administration of the second sec		☐ YES ☑ NO If YES, give details:				
	b. Have you been criminally charged before any court?		YES V NO				
	b. Have you been chillinally charged before any court:		If YES, give details:				
		Date Filed:					
			Status of Case/s:				
36.	·	v, decree, ordinance or regulation	☐ YES ☑ NO				
	by any court or tribunal?		If YES, give details:				
37.	Have you ever been separated from the service in any of the follo	-	✓ YES □ NO				
	retirement, dropped from the rolls, dismissal, termination, end of to out (abolition) in the public or private sector?	erm, imistied contract or phased	If YES, give details: Fnished contract and resignation				
38	a. Have you ever been a candidate in a national or local election h	neld within the last year (except	☐ YES ☑ NO				
	Barangay election)?		☐ YES ☑ NO If YES, give details:				
	b. Have you resigned from the government service during the thre	ee (3)-month period before the					
	last election to promote/actively campaign for a national or local c		If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent reside						
			If YES, give details (country):				
40.	r diodaint to: (d) maigoriodo i dopio o 7 tot (i a t do 7 1); (b) magna ot						
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), pleas	e answer the following items:					
a.	Are you a member of any indigenous group?		☐ YES ☑ NO If YES, please specify:				
b.	Are you a person with disability?						
			If YES, please specify ID No:				
C.	Are you a solo parent?		☐ YES ☑ NO If YES, please specify ID No:				
			III 123, please specify Ib No.				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /appoint	1					
	NAME	ADDRESS	TEL. NO.				
	Dr. Eugene B. Lañada	Baybay City, Leyte	(a) a				
	Hon. Vicente Victor G. Veloso	Baybay City, Leyte	(W)				
	Hon. Roberto Alojado	Baybay City, Leyte					
42.	I declare under oath that I have personally accomplished this F						
	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	The state of the s					
	administrative/criminal case/s against me.						
C	Sovernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)						
	PLEASE INDICATE ID Number and Date of Issuance						
C	Government Issued ID: Professional Regulation Comission	CRm.					
II	nse/Passport No.: 1785169 Signature (Sign inside		he box)				
	Date/Place of Issuance: June 25, 2019 Ormoc City, Leyte	07/15/2020 Date Accomplishe	ed Right Thumbmark				
Date / recompliance Inditional Inditional Inditional Inditional Inditional Inditional Inditional Inditional Individual In							
SUE	SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.						
	 	Oath					
			CS FORM 212 (Revised 2017). Page 4 of 4				