

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	JASMIN		
FIRST NAME	JOMAR		NAME EXTENSION (SR, JR.) N/A
MIDDLE NAME	ALMEROL		
3. DATE OF BIRTH (mm/dd/yyyy)	02/17/2000	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	HINDANG, LEYTE	If holder of dual citizenship, please indicate the details.	Philippines
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	0097 N/A House/Block/Lot No. Street N/A MA-ASIN Subdivision/Village Barangay HINDANG LEYTE City/Municipality Province
7. HEIGHT (m)	1.52 M	ZIP CODE	6523
8. WEIGHT (kg)	55 KG		
9. BLOOD TYPE	TYPE O	18. PERMANENT ADDRESS	0097 N/A House/Block/Lot No. Street N/A MA-ASIN Subdivision/Village Barangay HINDANG LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6523
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	N/A		
13. SSS NO.	06-4924875-7	19. TELEPHONE NO.	N/A
14. TIN NO.	637-832-231-00000	20. MOBILE NO.	09231489739
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	jmarjmin23@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (SR, JR.) N/A	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	JASMIN		RODOLFO ALMEROL JASMIN JR.	09/24/1990
FIRST NAME	RODOLFO	NAME EXTENSION (SR, JR.) N/A	JOMAR ALMEROL JASMIN	02/17/2000
MIDDLE NAME	SOCO		ROSITA ALMEROL JASMIN	11/21/2004
25. MOTHER'S MAIDEN NAME	TERESITA PANAL ALMEROL		RODOLFO ALMEROL JASMIN JR.	09/24/1990
SURNAME	JASMIN		JOMAR ALMEROL JASMIN	02/17/2000
FIRST NAME	TERESITA		ROSITA ALMEROL JASMIN	11/21/2004
MIDDLE NAME	ALMEROL		(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	MA-ASIN ELEMENTARY SCHOOL	ELEMENTARY	2007	2013	GRADUATED	2013	THIRD HONORABLE MENTION
SECONDARY	HINDANG NATIONAL HIGH SCHOOL	SENIOR HIGH SCHOOL	2017	2019	GRADUATED	2019	WITH HONORS
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF CULTURE AND ARTS EDUCATION	2019	2023	GRADUATED	2023	MAGNA CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	NA	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	May 29, 2024
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IV. CIVIL SERVICE ELIGIBILITY

[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.

[illegible]


(Continue on separate sheet if necessary)




SIGNATURE	
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Sumari

DATE

May 29, 2024

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			
N/A		N/A	N/A	N/A		
(Continue on separate sheet if necessary)						
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED						
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			
	Exposing Future Teachers on Internationalization Strategies: Developing Global Mindset	04/22/2023	04/22/2023	8 hours	Technical	Philippine Association For Teachers And Educators (PAFTE)
	School Learning Action Cel	04/20/2023	04/20/2024	2 hours	Technical	Pomponan National High School
	School Learning Action Cel	03/28/2023	03/28/2024	2 hours	Technical	Pomponan National High School
	KAALAM: Creative Forms and Narratives of the Contemporary	03/09/2022	03/09/2022	8 hours	Technical	Institute of Human Kinetics - Visayas State University
	Online Dance Teaching and Competition	07/03/2021	07/03/2021	8 hours	Technical	1PhysEd.Ph
	Jazz Dance Spectrum	06/19/2021	06/19/2021	8 hours	Technical	1PhysEd.Ph
	Virtual Teaching Strategies in Dance: A Response for the Demand of Learning in the New Normal	06/26/2021	06/26/2021	8 hours	Technical	1PhysEd.Ph
(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)		
	VOLLEYBALL	HVPB ONE DAY VOLLEYBALL LEAUGE 2023 - BEST SETTER		VISAYAS STATE UNIVERSITY ALUMNI ASSOCIATION, INC.		
	DANCING	MISS MAHOGANY UNIVERSE 2019 - SECOND RUNNERS UP		ADARNA (ARTISTS WITH DEDICATION TO ADVOCATE AND REPRESENT THE NATIONAL ARTS)		
	READING					
	WATCHING MOVIES					
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	May 29, 2024	

<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>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%;">EMAIL ADD.</th> </tr> </thead> <tbody> <tr> <td>BEA FATIMA S. PILAPIL</td> <td>BAYBAY CITY, LEYTE</td> <td>Bea.pilapil@deped.gov.ph</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	EMAIL ADD.	BEA FATIMA S. PILAPIL	BAYBAY CITY, LEYTE	Bea.pilapil@deped.gov.ph								
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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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<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>															



PHOTO

Right Thumbmark