

# 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	ESCANUELA		
FIRST NAME	JOCHRIS	NAME EXTENSION (JR., SR)	
MIDDLE NAME	JUNTILLA		
3. DATE OF BIRTH (mm/dd/yyyy)	7/5/1991	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	TACLOBAN CITY	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input checked="" type="checkbox"/> Widowed <input checked="" type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	BLOQ RESIDENCES    SIKATUNA ST House/Block/Lot No.    Street DAY-AS Subdivision/Village    Barangay CEBU CITY    CEBU City/Municipality    Province
7. HEIGHT (m)	1.67		
8. WEIGHT (kg)	65	ZIP CODE	
9. BLOOD TYPE	AB+	18. PERMANENT ADDRESS	B10 L22 House/Block/Lot No.    Street LOLITA VILLAGE    BRGY 96 Subdivision/Village    Barangay TACLOBAN CITY    LEYTE City/Municipality    Province
10. GSIS ID NO.		ZIP CODE	
11. PAG-IBIG ID NO.	1210 2760 1967		
12. PHILHEALTH NO.			
13. SSS NO.	039 175 0933	19. TELEPHONE NO.	0915 125 8201
14. TIN NO.	284 856 569	20. MOBILE NO.	0915 125 8201
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	<a href="mailto:JOC.ESCANUELA@GMAIL.COM">JOC.ESCANUELA@GMAIL.COM</a>

## 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 (JR., SR)	N/A	
MIDDLE NAME	N/A		N/A	
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	ESCANUELA			
FIRST NAME	CHRISTOPHER	NAME EXTENSION (JR., SR)		
MIDDLE NAME	ARAGON			
25. MOTHER'S MAIDEN NAME				
SURNAME	ESCANUELA			
FIRST NAME	JOJI			
MIDDLE NAME	JUNTILLA			

(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	HOLY INFANT COLLEGE		1998	2004			
SECONDARY	HOLY INFANT COLLEGE		2004	2008			
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	UNIVERSITY OF SAN CARLOS	B.S ECONOMICS	2008	2012		2012	
GRADUATE STUDIES	ATENEO DE MANILA UNIVERSITY , GRADUATE SCHOOL OF BUSINESS	MASTER IN BUSINESS ADMINISTRATION	2018	STUDENT LEAVE			

(Continue on separate sheet if necessary)

SIGNATURE	JOCHRIS ESCANUELA 	DATE	June 14, 2023
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