

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	BALDICANTOS		
FIRST NAME	JURICH ASHLEY	NAME EXTENSION (JR., SR)	
MIDDLE NAME	QUINTANA		
3. DATE OF BIRTH (mm/dd/yyyy)	08/09/2001	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.	<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	ABUYOG, LEYTE		
5. SEX	<input type="checkbox"/> Male <input checked="" 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 ZIP CODE	NONE House/Block/Lot No. Street NONE PICAS NORTE Subdivision/Village Barangay JAVIER LEYTE City/Municipality Province 6511
7. HEIGHT (m)	1.6 m		
8. WEIGHT (kg)	65 kg		
9. BLOOD TYPE	O		
10. GSIS ID NO.	NONE		
11. PAG-IBIG ID NO.		18. PERMANENT ADDRESS ZIP CODE	NONE House/Block/Lot No. Street NONE PICAS NORTE Subdivision/Village Barangay JAVIER LEYTE City/Municipality Province 6511
12. PHILHEALTH NO.			
13. SSS NO.			
14. TIN NO.		19. TELEPHONE NO.	NONE
		20. MOBILE NO.	09664925052
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	jurichqb@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	NONE		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)	NONE	N/A
MIDDLE NAME				
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	BALDICANTOS			
FIRST NAME	ASIS	NAME EXTENSION (JR., SR)		
MIDDLE NAME	DOYOGAN			
25. MOTHER'S MAIDEN NAME				
SURNAME	QUINTANA			
FIRST NAME	JOSEPHINE			
MIDDLE NAME	MAICO		(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	B.V. CLOSA CENTRAL SCHOOL	ELEMENTARY	2008	2014	N/A	2014	NONE
SECONDARY	NOTRE DAME OF ABUYOG	HIGH SCHOOL	2014	2020	N/A	2020	NONE
VOCATIONAL / TRADE COURSE	NONE						
	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN STATISTICS	2020	2024	N/A	2024	NONE
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	OCTOBER 13, 2024
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]


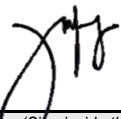
(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION	
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31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
PROFICIENT WITH MICROSOFT TOOLS	NONE	NONE
ORIENTED IN RSTUDIO SOFTWARE		
ORIENTED IN STATA SOFTWARE		
LOGIC AND VERBAL REASONING		
KEEN ATTENTION TO DETAILS		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	OCTOBER 13, 2024
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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, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? 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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>												
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: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)														
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>LEONARDO PIGA JR.</td><td>NOTRE DAME OF ABUYOG, INC.</td><td>9665442846</td></tr><tr><td>MARIA PURISIMA AURORA N. ESTOLANO</td><td>PHILIPPINE STATISTICS AUTHORITY</td><td>9298379325</td></tr><tr><td>NORBERTO E MILLA JR.</td><td>VISAYAS STATE UNIVERSITY</td><td>9473941899</td></tr></table>		NAME	ADDRESS	TEL. NO.	LEONARDO PIGA JR.	NOTRE DAME OF ABUYOG, INC.	9665442846	MARIA PURISIMA AURORA N. ESTOLANO	PHILIPPINE STATISTICS AUTHORITY	9298379325	NORBERTO E MILLA JR.	VISAYAS STATE UNIVERSITY	9473941899	<div></div> <div>PHOTO</div> <div><div></div><div>Right Thumbmark</div></div>
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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.														
<div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: NATIONAL ID</div> <div>ID/License/Passport No.: 6302-4154-8721-8907</div> <div>Date/Place of Issuance: JAVIER, LEYTE</div>	<div><div></div><div>Signature (Sign inside the box)</div><div>OCTOBER 13, 2024</div><div>Date Accomplished</div></div>													
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.														
<div></div> <div>Person Administering Oath</div>														