

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	ADOLFO		
FIRST NAME	MARIJOY CRIS		NAME EXTENSION (JR., SR)
MIDDLE NAME	CALVAR		
3. DATE OF BIRTH (mm/dd/yyyy)	6/26/1998	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	ANTIPOLO CITY	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		Pls. indicate country:
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	Philippines
7. HEIGHT (m)	155 M.	House/Block/Lot No	PUROK I
8. WEIGHT (kg)	60 KGS	ALEGRIA	Street
9. BLOOD TYPE	"B"	Subdivision/Village	BACULOD
10. GSIS ID NO.		HINUNDAYAN	Barangay
11. PAG-IBIG ID NO.		City/Municipality	SOUTHERN LEYTE
12. PHILHEALTH NO.		ZIP CODE	Province
13. SSS NO.	CRN-0111-9854901-6 / 06-4126324-8	18. PERMANENT ADDRESS	
14. TIN NO.	722-172-128	House/Block/Lot No	PUROK I
15. AGENCY EMPLOYEE NO.		ALEGRIA	Street
19. TELEPHONE NO.		Subdivision/Village	BACULOD
20. MOBILE NO.		HINUNDAYAN	Barangay
21. E-MAIL ADDRESS (if any)		City/Municipality	SOUTHERN LEYTE
		ZIP CODE	Province
			6609
			NONE
			09473290830 / 09060576991
			mccadolfo26@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 (JR., SR)	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	ADOLFO			
FIRST NAME	JULIAN	NAME EXTENSION (JR., SR)		
MIDDLE NAME	DAGONGDONG			
25. MOTHER'S MAIDEN NAME				
SURNAME	CALVAR			
FIRST NAME	CRISPINA			
MIDDLE NAME	ABUYAN			

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	LUNGSODAAN ELEMENTARY SCHOOL	ELEMENTARY	2004	2010	GRADUATED	2010	N/A
SECONDARY	LUNGSODAAN NATIONAL HIGH SCHOOL	SECONDARY	2010	2014	GRADUATED	2014	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY (VSU-VISCA)	BACHELOR OF SCIENCE IN AGRI-BUSINESS	2014	2018	GRADUATED	2018	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

SIGNATURE		DATE	June 9, 2021
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IV. CIVIL SERVICE ELIGIBILITY

27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	DRIVER'S LICENSE		8/17/2018	LTO-SAN JUAN, SOUTHERN LEYTE	H11-18-000806	6/26/2023
	CAREER SERVICE EXAMINATION- SUBPROFESSIONAL LEVEL	80.93	5/25/2021	CSC RO VIII - PALO, LEYTE	R08-20210604-004	

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE	<i>[Signature]</i>	DATE	June 9, 2021
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29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	Young Southern Leyteños in Cebu Organization	3/1/2020	Present		Secretary
	Parish Commission on Youth (Religious Group)	2016	2018		President-Parish Commission on Youth

(Continue on separate sheet if necessary)

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

[illegible]

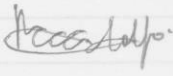
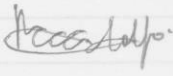
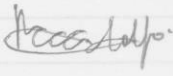






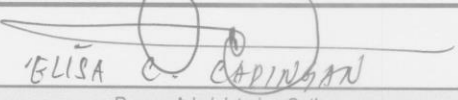
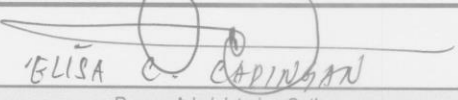
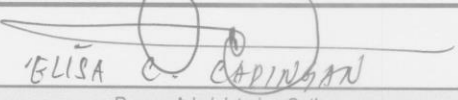
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VIII. OTHER INFORMATION

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(Continue on separate sheet if necessary)

SIGNATURE	<i>Karen Delgado</i>	DATE	June 9, 2021
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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)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details:												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: Date Filed: _____ Status of Case/s: _____												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
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?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: <u>Resigned due to COVID 19 Pandemic</u>												
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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details (country): _____												
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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)													
<table><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>ATTY. LESSANDRO B. MARAON, RN</td><td>OFFICE OF THE PRESIDENTIAL ASSISTANT FOR THE VISAYAS (OPAV) THE GREENERY, ST. JOHN PAUL II AVENUE, CEBU CITY</td><td>09173061727</td></tr><tr><td>RONALYN A. EPIZ</td><td>DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT, REGIONAL OFFICE 7 SUDLON, LAHUG, CEBU CITY</td><td>09177110718</td></tr><tr><td>BENITO I. TAGOLE</td><td>BACULOD, HINUNDAYAN, SO. LEYTE</td><td>09205133916</td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	ATTY. LESSANDRO B. MARAON, RN	OFFICE OF THE PRESIDENTIAL ASSISTANT FOR THE VISAYAS (OPAV) THE GREENERY, ST. JOHN PAUL II AVENUE, CEBU CITY	09173061727	RONALYN A. EPIZ	DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT, REGIONAL OFFICE 7 SUDLON, LAHUG, CEBU CITY	09177110718	BENITO I. TAGOLE	BACULOD, HINUNDAYAN, SO. LEYTE	09205133916
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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.													
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SUBSCRIBED AND SWORN to before me this <u>9th of June 2021</u> , affiant exhibiting his/her validly issued government ID as indicated above.													
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