

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	AGARCIO		
FIRST NAME	KYLE	N/A	
MIDDLE NAME	CATIVO		
3. DATE OF BIRTH (mm/dd/yyyy)	3/2/2000	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	JARO, LEYTE	If holder of dual citizenship, please indicate the details.	Philippines
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	532 SAN JOSE ST. JARO LEYTE House/Block/Lot No. Street BRGY. IV Subdivision/Village Barangay JARO LEYTE City/Municipality Province 6527
7. HEIGHT (m)	1.5m	18. PERMANENT ADDRESS	532 SAN JOSE ST. JARO LEYTE House/Block/Lot No. Street BRGY. IV Subdivision/Village Barangay JARO LEYTE City/Municipality Province 6527
8. WEIGHT (kg)	58	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	N/A	20. MOBILE NO.	09351084505
10. GSIS ID NO.	N/A	21. E-MAIL ADDRESS (if any)	kyleagarcio@gmail.com
11. PAG-IBIG ID NO.	121328947002		
12. PHILHEALTH NO.	13-252879851-2		
13. SSS NO.	06-4671754-0		
14. TIN NO.	639-207-153-00000		
15. AGENCY EMPLOYEE NO.	N/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	N/A	N/A
MIDDLE NAME	N/A	N/A	N/A
OCCUPATION	N/A	N/A	N/A
EMPLOYER/BUSINESS NAME	N/A	N/A	N/A
BUSINESS ADDRESS	N/A	N/A	N/A
TELEPHONE NO.	N/A	N/A	N/A
24. FATHER'S SURNAME	AGARCIO	N/A	
FIRST NAME	ALBEN	N/A	
MIDDLE NAME	SABALONES	N/A	
25. MOTHER'S MAIDEN NAME	CATIVO	N/A	
SURNAME	JUVY	N/A	
FIRST NAME	BOYO	N/A	
MIDDLE NAME		(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	N/A
			From	To			
ELEMENTARY	ILUSTRE CENTRAL ELEMENTARY SCHOOL	ELEMENTARY	2012	2013	GRADUATED	2013	2ND HONORABLE MENTION
SECONDARY	GRANJA-KALINAWAN NATIONAL HIGH SCHOOL	JUNIOR HIGH SCHOOL	2013	2017	GRADUATED	2017	N/A
SECONDARY	ALANGALANG 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	EASTERN VISAYAS STATE UNIVERSITY MAIN CAMPUS	BACHELOR OF PHYSICAL EDUCATION	2019	2023	GRADUATED	2023	ACADEMIC ACHIEVER
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE	Agarcio	DATE	MARCH 04, 2025
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(Continue on separate sheet if necessary)

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			

NOTHING TO FOLLOW

(rate sheet if necessary)

NOTHING TO FOLLOW

rate sheet if necessary)

Agarrio

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)?

☐ YES ☒ NO
☐ YES ☒ 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?

☐ YES ☒ NO
If YES, give details: _____
☐ YES ☒ 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?

☐ YES ☒ 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?

☐ YES ☒ NO
If YES, give details: _____

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?

☐ YES ☒ NO
If YES, give details: _____
☐ YES ☒ NO
If YES, give details: _____

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES ☒ NO
If YES, give details (country): _____

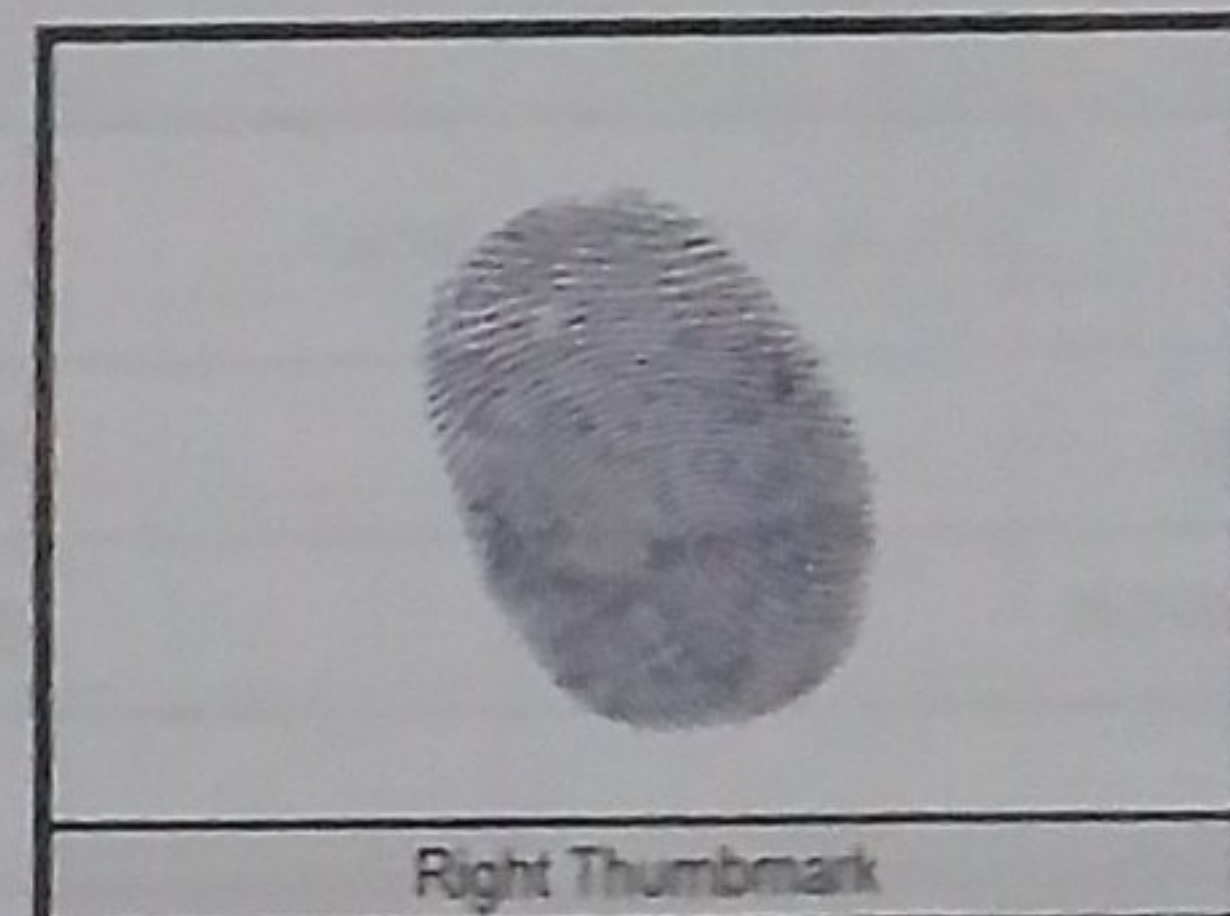
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:
a. Are you a member of any indigenous group?
b. Are you a person with disability?
c. Are you a solo parent?

☐ YES ☒ NO
If YES, please specify: _____
☐ YES ☒ NO
If YES, please specify ID No: _____
☐ YES ☒ NO
If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant / appointee)

NAME	ADDRESS	TEL. NO.
ALVIN A. CIPRIANO	BRGY. CANHANDUGAN JARO, LEYTE	09353007651
LOUIS MACLING	BRGY. 88 COSTA BRAVA SAN JOSE TACLOBAN CITY	09369371734
JOVELYN S. CAPAYCAPAY	BRGY. IV JARO, LEYTE	09669561214

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.



Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: PROFESSIONAL REGULATION COMMISSION

ID/License/Passport No.: 2287290

Date/Place of Issuance: 02/26/2025 TACLOBAN CITY

Signature (Sign inside the box)
MARCH 04, 2025

SUBSCRIBED AND SWORN to before me this 03/04/2025 affiant exhibiting his/her validly issued government ID as indicated above.

WILLINDA A. KASANGKATANG
CLERK OF COURT II
Person Administering Oath