

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	CABABAG		
FIRST NAME	ANGELO	NAME EXTENSION (JR., SR.)	N/A
MIDDLE NAME	BONTO		
3. DATE OF BIRTH (mm/dd/yyyy)	04/30/1995	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pis. indicate country: Philippines
4. PLACE OF BIRTH	MANILA	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 type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:		
7. HEIGHT (m)	1.68 m	17. RESIDENTIAL ADDRESS	N/A House/Block/Lt. No. Street N/A VICTORY Subdivision/Village Barangay ABUYOG LEYTE City/Municipality Province
8. WEIGHT (kg)	53 kg.	ZIP CODE	6510
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	N/A House/Block/Lt. No. Street N/A VICTORY Subdivision/Village Barangay ABUYOG LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6510
11. PAG-IBIG ID NO.	121233205673	19. TELEPHONE NO.	N/A
12. PHILHEALTH NO.	1320-2513-0689	20. MOBILE NO.	09279334016
13. SSS NO.	0641742060	21. E-MAIL ADDRESS (if any)	angelocababag21@gmail.com
14. TIN NO.	352-841-163-00000		
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		NAME EXTENSION (JR., SR.)	N/A	N/A
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	CABABAG			
FIRST NAME	DANILO	NAME EXTENSION (JR., SR.)	N/A	
MIDDLE NAME	YARANON			
25. MOTHER'S MAIDEN NAME	MARY ANN MENDOZA BONTO			
SURNAME	CABABAG			
FIRST NAME	MARY ANN			
MIDDLE NAME	BONTO			

(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	STA. FE STO. NIÑO ELEMENTARY SCHOOL	ELEMENTARY	2001	2007	GRADUATED	2007	N/A
SECONDARY	ABUYOG NATIONAL HIGHSCHOOL	HIGHSCHOOL	2007	2012	GRADUATED	2012	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	ABUYOG COMMUNITY COLLEGE	BACHELOR OF SCIENCE IN ENTREPRENEURSHIP	2014	2018	GRADUATED	2018	CHED StuFAPs
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)


SIGNATURE		DATE	02/06/2024	CS FORM 212 (Revised 2017), Page 1 of 4
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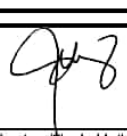
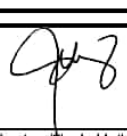
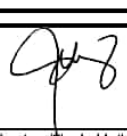





IV. CIVIL SERVICE ELIGIBILITY						
27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	CAREER SERVICE EXAMINATION (PROFESSIONAL)	81.83%	03/26/2023	TACLOBAN CITY	N/A	N/A

V. WORK EXPERIENCE
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

SIGNATURE		DATE	02/06/2024	CS FORM 212 (Revised 2017), Page 2 of 4
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<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> <hr/> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">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: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>CHRISTINE MAY SUDARIO</td> <td>PALO, LEYTE</td> <td>09386170224</td> </tr> <tr> <td>ARCHIE FERNANDEZ</td> <td>ORMOC, LEYTE</td> <td>09686909092</td> </tr> <tr> <td>MARY GRACE AGUILOS</td> <td>CARIGARA, LEYTE</td> <td>09654131822</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	CHRISTINE MAY SUDARIO	PALO, LEYTE	09386170224	ARCHIE FERNANDEZ	ORMOC, LEYTE	09686909092	MARY GRACE AGUILOS	CARIGARA, LEYTE	09654131822		
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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: 200px; height: 60px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>															

WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

- Duration: August 16, 2023 – present
- Position: Encoder
- Name of Office/Unit: Tacloban Sub Distribution Center
- Immediate Supervisor: Renato A. Nacionales
- Name of Agency/Organization and Location: Philippine Postal Corporation/Tacloban City

- List of Accomplishments and Contributions (if any)

- Submitted monthly fuel consumption reports.

- Summary of Actual Duties

- Encode mail data and other items due for encoding.
 - Assist in the processing of mails for dispatch and delivery including sorting, backstamping, and other related functions.

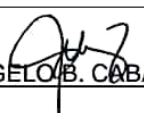
- Duration: August 10, 2022 – May 27, 2023
- Position: Jobber Fund Clerk
- Name of Office/Unit: Finance Department
- Immediate Supervisor: Archie Fernadez
- Name of Agency/Organization and Location: Onyata Trading Corporation, Tacloban City

- List of Accomplishments and Contributions (if any)

- Submitted reports (incident) on issues concerning sellers (discrepancies on sales, inventory shortages/overages etc.)
 - Submitted reports on actual sales/remittance.

- Summary of Actual Duties

- Conduct actual inventory count in medium and small units, and reconciling sales based on remaining inventory versus remittance on a weekly basis or as needed.
 - Provide OSB Clerk (Order, Shipping and Billing) the final loadable amount of the seller based on the jobber reconciliation done.
 - Ensure the completeness and correctness of supporting documents used for the reconciliation.
 - Ensure the validity of deductions made to sales.
 - Checks Weekly Expense Report (WER) of sellers.
 - Daily Customer Store Confirmation via Actual Visit or Telephone Back Check.
 - Weekly jobber fund reconciliation.


ANGELO B. CABABAG

(Signature over Printed Name
of Employee/Applicant)

Date: 02-06-2024

