

PERSONAL DATA SHEET

WARNING: Any misinterpretation 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	LAUSE		
FIRST NAME	MARICAR	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	MADJUS		
3. DATE OF BIRTH (mm/dd/yyyy)	FEBRUARY 5, 1999	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	LAS PIÑAS, CITY	If holder of dual citizenship, please indicate the details.	
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	N/A FIRST House/Block/Lot No. Street N/A PANGASUGAN Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province 6521
7. HEIGHT (m)	1.51	ZIP CODE	
8. WEIGHT (kg)	54		
9. BLOOD TYPE	O		
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	N/A	18. PERMANENT ADDRESS	N/A N/A House/Block/Lot No. Street N/A MANSAHA-ON Subdivision/Village Barangay MATAG-OB LEYTE City/Municipality Province 6532
12. PHILHEALTH NO.	1302-5534-2968	ZIP CODE	
13. SSS NO.	06-4116520-7	19. TELEPHONE NO.	N/A
14. TIN NO.	359-800949-0000	20. MOBILE NO.	09700609755
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	maricar.lause@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	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	LAUSE			
FIRST NAME	OSCAR	NAME EXTENSION (JR., SR)		
MIDDLE NAME	SALES			
25. MOTHER'S MAIDEN NAME	VIACRUCIS			
SURNAME	LAUSE			
FIRST NAME	MIRASOL			
MIDDLE NAME	MADJUS		(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)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	MANSAHA-ON ELEMENTARY SCHOOL	PRIMARY EDUCATION	JUNE 16, 2005	MAY 10, 2011	GRADUATE	2011	SALUTATORIAN
SECONDARY	MATAG-OB NATIONAL HIGH SCHOOL	SPECIAL SCIENCE CLASS	JUNE 6, 2011	MAY 18, 2015	GRADUATE	2015	THIRD HONORABLE MENTION
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A		N/A	N/A	N/A
COLLEGE	PALOMPON INSTITUTE OF TECHNOLOGY	BACHELOR OF SECONDARY EDUCATION MAJOR IN ENGLISH	JUNE 4, 2015	MAY 24, 2019	GRADUATE	2019	MAGNA CUM LAUDE
POST-GRADUATE STUDIES	PALOMPON INSTITUTE OF TECHNOLOGY	MASTER OF ARTS IN EDUCATION MAJOR IN ENGLISH	AUGUST 8, 2020	PRESENT	30	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	January 6, 2022
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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
	LICENSURE EXAMINATION FOR TEACHERS (LET)	84.4	SEPTEMBER 29, 2019	TACLOBAN CITY	1825617	5/2/2023
	CSC HONOR GRADUATE ELIGIBILITY	N/A	AUGUST 15, 2019	CSC REGIONAL OFFICE TACLOBAN CITY	100108190412	7/26/2019

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	JANUARY 6, 2022
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S					
29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK	
	From	To			
PIT COLLEGE STUDENT PUBLICATION-FULCRUM	06-24-2015	04-24-2019	3500.0	Deputy Editor II/ Journalist	
	7/12/2018	04-24-2019	65.0	Vice-President	
FUTURE EDUCATORS ORGANIZATION	6/6/2015	04-24-19	15.0	Member	
WORLD VISION DEVELOPMENT FOUNDATION	06/ 24/2014	09/23/2016	245.0	Facilitator	
(Continue on separate sheet if necessary)					
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED					
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)					
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			
BASIC COMPUTER OPERATION TRAINING	02-15-2021	02-28-2021	80.0	TECHNICAL	Palompon Institute of Technology
REGIONAL TERTIARY SCHOOLS PRESS CONFERENCE	09-19-2018	09-22-2018	32.0	TECHNICAL	Rappler/ CHed
REGIONAL TERTIARY SCHOOLS PRESS CONFERENCE	02-22-2017	02-25-2017	32.0	TECHNICAL	Rappler/ CHed
ANG GUBAT: PLAYWRIGHT WORKSHOP	6/5/2021	7/24/2021	12.0	TECHNICAL	FOREST SUSTAINABILITY LAB-DLABS
UNDERSTANDING CORPUS LINGUISTICS	9/22/2021	09/22//2021	3.0	TECHNICAL	VSU CAS-DLABS
GLOBALIZATION: INTERDEPENDENCY OF ASIA PACIFIC NATIONS VIS-A-VIS SOUTH CHINA SEA POLITICAL TENSION	11/10/2021	11/10/2021	2.0	TECHNICAL	VSU CAS-DLABS
(Continue on separate sheet if necessary)					
VIII. OTHER INFORMATION					
31. SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)			33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
JOURNALISTIC SKILLS	CHAMPION ON FEATURE WRITING FILIPINO DURING THE REGIONAL TERTIARY SCHOOLS PRESS CONFERENCE 2018			PIT COLLEGE STUDENT PUBLICATION-FULCRUM	
HOSTING	FIFTH PLACE RADIO BROADCASTING RTSPC 2018			FUTURE EDUCATORS ORGANIZATION	
	EDITORIAL WRITER OF THE YEAR 2018			PIT SCHOLARS ASSOCIATION	
	SECOND PLACE NEWS WRITING FILIPINO IN RTSPC 2017			WORLD VISION DEVELOPMENT FOUNDATION	
(Continue on separate sheet if necessary)					
SIGNATURE				DATE	
				JANUARY 6, 2022	

<p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to 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> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>Status of Case/s: _____</p>												
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation?</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, etc.?</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 for the election for the position of Mayor, Vice Mayor, or Councilor)?</p> <p>b. Have you resigned from the government service during the three (3)-month period before the election?</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</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>ROTHELIA MARIA G. UGSAD</td> <td>PALOMPON, LEYTE</td> <td>N/A</td> </tr> <tr> <td>ROUSHIELL FRANCE S. LONDON</td> <td>PALOMPON, LEYTE</td> <td>N/A</td> </tr> <tr> <td>MARTHY JOHN LUBIANO</td> <td>PALOMPON, LEYTE</td> <td>N/A</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	ROTHELIA MARIA G. UGSAD	PALOMPON, LEYTE	N/A	ROUSHIELL FRANCE S. LONDON	PALOMPON, LEYTE	N/A	MARTHY JOHN LUBIANO	PALOMPON, LEYTE	N/A
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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>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td colspan="2">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID:</td> <td>PhilHealth</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>13-025534296-8</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>May 2019/ Ormoc City</td> </tr> </table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)		PLEASE INDICATE ID Number and Date of Issuance		Government Issued ID:	PhilHealth	ID/License/Passport No.:	13-025534296-8	Date/Place of Issuance:	May 2019/ Ormoc City	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 100px; vertical-align: bottom; text-align: center;"> Signature (Sign inside the box) JANUARY 6, 2022 Date Accomplished </td> <td style="width: 150px; height: 100px; vertical-align: bottom; text-align: center;"> Right Thumbmark </td> </tr> </table>	Signature (Sign inside the box) JANUARY 6, 2022 Date Accomplished	Right Thumbmark
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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: 50px; margin: 10px auto; text-align: center; padding-top: 5px;"> Person Administering Oath </div>													



PHOTO

Right Thumbmark