

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 FIRST NAME MIDDLE NAME	AVELLANA		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:	
	JOSELITO					NAME EXTENSION (JR., SR)
	PARMIS					
3. DATE OF BIRTH (mm/dd/yyyy)	07/25/1997	17. RESIDENTIAL ADDRESS ZIP CODE	323 G. H. DEL PILAR ST.			
4. PLACE OF BIRTH	ORMOC CITY		House/Block/Lot No. Street			
5. SEX <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female			N/A ZONE 6			
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:			Subdivision/Village Barangay			
7. HEIGHT (m)	1.64	18. PERMANENT ADDRESS ZIP CODE	BAYBAY CITY LEYTE			
8. WEIGHT (kg)	65		City/Municipality Province			
9. BLOOD TYPE	A		323 G. H. DEL PILAR ST.			
10. GSIS ID NO.	N/A		House/Block/Lot No. Street			
11. PAG-IBIG ID NO.	121264636560	19. TELEPHONE NO.	N/A			
12. PHILHEALTH NO.	13-250361605-3		N/A ZONE 6			
13. SSS NO.	N/A		Subdivision/Village Barangay			
14. TIN NO.	759-534-095		BAYBAY CITY LEYTE			
15. AGENCY EMPLOYEE NO.	N/A	20. MOBILE NO.	09064441864			
		21. E-MAIL ADDRESS (if any)	joselito.avellana@vsu.edu.ph			

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME FIRST NAME MIDDLE NAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
	N/A	NAME EXTENSION (JR., SR)		
	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME FIRST NAME MIDDLE NAME	AVELLANA			
	JOSE	NAME EXTENSION (JR., SR)		
	MODINA			
25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME	PARMIS			
	AVELLANA			
	ZENaida			
	CAHILIG			

(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	BAYBAY II CENTRAL SCHOOL	PRIMARY EDUCATION	2004	2010	N/A	2010	N/A

SECONDARY	FRANCISCAN COLLEGE OF THE IMMACULATE	HIGH SCHOOL	2010	2014	N/A	2014	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A		
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR IN SECONDARY EDUCATION	2014	2018	N/A	2018	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A		
<i>(Continue on separate sheet if necessary)</i>							
SIGNATURE			DATE		12/23/2023		

IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]

<i>(Continue on separate sheet if necessary)</i>							
SIGNATURE				DATE		12/23/2023	

<i>(Continue on separate sheet if necessary)</i>			
SIGNATURE		DATE	12/23/2023

<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, <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO a. within the third degree? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO b. within the fourth degree (for Local Government Unit - Career Employees)? <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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO b. Have you been criminally charged before any court? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>	<p>If YES, give details: _____</p> <p>If YES, give details: Date Filed: _____ 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? <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? <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)? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 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</p>	<p>If YES, give details: _____</p> <p>If YES, give details: _____</p>
<p>39. Have you acquired the status of an immigrant or permanent resident of another country? <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: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?</p>	<p>If YES, please specify: _____</p> <p>If YES, please specify ID No: _____</p> <p>If YES, please specify ID No: _____</p>

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

NAME	ADDRESS	TEL. NO.
Daniel Joseph Tan	Baybay City, Leyte	9682621590
Karen Mendez	Baybay City, Leyte	9359469129
Annelyn L. Nunez	Brgy Caridad, Baybay City, Leyte	9606647907

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.

ID picture taken within the last 6 months
3.5 cm. X 4.5 cm
(passport size)

With full and handwritten name tag and signature over printed name

Computer generated or photocopied picture is not acceptable

PHOTO

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)

PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: PRC

ID/License/Passport No.: 1699853

Date/Place of Issuance: 01/04/2010

Signature (Sign inside the box)

12/23/2023

Date/Place of issuance: 01/04/2019

Date Accomplished

Right Thumbmark

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

Person Administering Oath