## **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. (Do not fill up. For CSC use only)									
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	MARTINEZ								
FIRST NAME	MARIEL	NAME EXTENSION (JR., SR)							
MIDDLE NAME	BELARMA								
DATE OF BIRTH     (mm/dd/yyyy)	3/30/200	)2	16. CITIZENSHIP	✓ Filipino ☐ Dual Citizenship					
, ,,,,					□ by birth □ by naturalization				tion
4. PLACE OF BIRTH	BAYBAY WESTERN HOSPITAL		If holder of dual citizenship,		Pls. indicate country:				
5. SEX	☐ Male ☑ Female		please indicate the details.		Philippines				•
6 CIVIL STATUS					se/Block/Lot No.			Zone 3 Street	
								Patag	
7. HEIGHT (m)	1.46304				bdivision/Village Baybay			Barangay Leyte	
8. WEIGHT (kg)	50		ZIP CODE	CI	City/Municipality		Province 6521		
9. BLOOD TYPE	B+		18. PERMANENT ADDRESS					Zone 3	
10. GSIS ID NO.	N/A			House/Block/Lot No.			Street Patag		
				Sub	odivision/Village Baybay	ı	Barangay  Leyte		
11. PAG-IBIG ID NO.	N/A			City/Municipality			Province		
12. PHILHEALTH NO.	N/A		ZIP CODE		6521				
13. SSS NO.	N/A		19. TELEPHONE NO.		N/A				
14. TIN NO.	N/A		20. MOBILE NO.		09195989553				
15. AGENCY EMPLOYEE NO.	N/A		21. E-MAIL ADDRESS (if any)		martinez.marielako23@gmail.com				
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	N/A		NAME EXTENSION (JR., SR)	23. NAME of CHILDREN (Write full name and li			ist all)	DATE OF BIRT	ΓΗ (mm/dd/yyyy)
FIRST NAME	N/A		THURE EXTENSION (U.C., ON)	N/A					
MIDDLE NAME	N/A								
OCCUPATION	N/A								
EMPLOYER/BUSINESS NAME BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER'S SURNAME	N/A MARTINEZ								
FIRST NAME	ARMANDO		NAME EXTENSION (JR., SR)						
MIDDLE NAME		IGOT							
25. MOTHER'S MAIDEN NAME	1001								
SURNAME	BELARMA								
FIRST NAME		ELIZABETH							
MIDDLE NAME	NAYGA		(Continue on separate sheet if necessary)						
EDUCATIONAL BACKGROUND									
26. LEVEL	NAME OF SCI (Write in fu		BASIC EDUCATION/DEGREI (Write in full)	E/COURSE	PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	PATAG ELEMENTARY SCHOOL		PRIMARY SCHOOL		6/3/2008	3/29/2014		2014	SALUTATOR IAN
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL & Integradet High School		HIGH SCHOOL & SENIOR HIGH: ACCOUNTANCY, BUSINESS, AND MANAGEMENT TRACT		6/13/2014	3/24/2020		2020	IAN
VOCATIONAL / TRADE COURSE	N/A		N/A						
COLLEGE	VISAYAS STATE UNIVERSITY		BACHELOR OF PHYSICAL EDUCATION		8/15/2020	8/7/2024		2024	CUM LAUDE
GRADUATE STUDIES									
		/ (C	ontinue on separate sheet if neces	ssary)					
SIGNATURE	Mr.			DATE		July 29, 2024			

IV.	CIVIL SE	ERVICE ELIG	BILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/BAR) UNDER			RATING	DATE OF	PLACE OF EXAMINA	LICENSE (if a	pplicable)			
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	EXAMINATION / CONFERMENT	TION/ CONFER	(MEN I	NUMBER	Date of Validity			
				(Coi	ntinue on separate sheet	if necessary)				
V.	WORK E	XPERIENCE	nt. Start from your recent							
(Inc	INCLU	ate employme. JSIVE DATES					Work Exper	SALARY/ JOB/ PAY		COVIT
	(mı	m/dd/yyyy)	POSITION T (Write in full/Do not	ITLE abbreviate)	DEPARTMENT / AG (Write in ful	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)	
	From	То					INCREMENT		(.,,	
$\vdash$										
	(Continue on separate sheet if necessary)									
SIGNATURE			_	em.		<b>DATE</b> July.			29, 2024	

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/ PEOPLE / \	OLUNTARY (	ORGANIZATIO	DN/S		
29. NAME & ADDRESS OF OF (Write in full)	( · · · · / 1.1/ )		NUMBER OF HOURS	POSITION / NATURE OF WORK			
Bachelor of Physical Education Student Society (BPEDSS)			S.Y 2023			Organization Vice- President	
Student Proclaimaing a Righteous King and Savior (SPARKS)			S.Y 2024			Organization President	
Allegiance of Physical Educatirs towards Excelle	ence 2023-2024	S.Y 2023	S.Y 2024		Organization 4th year Representative		
VII. LEARNING AND DEVELOPMENT (L&D)			sheet if necessary, TTENDED	)	_		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			E DATES OF NDANCE dd/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/SPONSORED BY (Write in full)	
Sports Clinic: Organizing, Managing, and Officiating S	Swimming Competition	4/3/2023	4/3/2023	8 hrs		Bachelor of Physical Education Student Society	
Sports Camp 202		9/17/2023	9/17/2023	8 hrs		Bachelor of Physical Education Student Society	
KAALAM Seminar Series- PATHFit: Current Trends a Curriculum	and Research in Physical Educationi	3/20/2024	3/20/2024	2 hrs		IHK	
PAFTE 8 REGIONAL PRE-SERVICE TEAC	CHERS' CONGRESS 2024	3/22/2024	3/22/2024	8 hrs		PAFTE Region VIII	
	(Con	tinue on separate	sheet if necessary				
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. (Write in full)				(Write in full)		
Playing Football/Futsal Playing Instruments (Ukulele, Guitar, Organ,	Society (				Bachelor of Physical Education Student Society (BPEDSS) 2022-2023 Student Proclaimaing a Righteous King and		
Flute, Violin) - beginner level	FUTSAL Gold Meda		-		Savior (SPARKS) 2022-2024  Allegiance of Physical Educatirs towards		
	Atletang Edukalista Award 2023 by COED				Excellence 2023-2024		
	(Con	sheet if necessary					
SIGNATURE	l e			DA	A <i>TE</i>	07/29/2024	

34. Are you related by consanguinity or affinity to chief of bureau or office or to the person when Bureau or Department where you will be applied as within the third degree? b. within the fourth degree (for Local Government)	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:					
35. a. Have you ever been found guilty of any a	☐ YES ☑ NO If YES, give details:					
b. Have you been criminally charged before	☐ YES ☑ NO If YES, give details:     Date Filed: Status of Case/s:					
36. Have you ever been convicted of any crime any court or tribunal?	36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?					
	vice in any of the following modes: resignation, retirement, end of term, finished contract or phased out (abolition	☐ YES ☑ NO If YES, give details:				
38. a. Have you ever been a candidate in a nati Barangay election)?	onal or local election held within the last year (except	☐ YES ☑ NO If YES, give details:				
	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?					
39. Have you acquired the status of an immigra	☐ YES ☑ NO If YES, give details (country):					
<ul> <li>40. Pursuant to: (a) Indigenous People's Act (Ro 7277); and (c) Solo Parents Welfare Act of 2 a. Are you a member of any indigenous group?</li> <li>b. Are you a person with disability?</li> <li>c. Are you a solo parent?</li> </ul>	☐ YES					
41. REFERENCES (Person not related by consanguinity or	affinity to applicant /appointed)					
NAME Ersin R. Bergado	ADDRESS  Seguinon National High School	*Contact number is available upon				
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.  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 PLEASE INDICATE ID Number and Date of Issuan Government Issued ID:  ID/License/Passport No.:  Date/Place of Issuance:						
SUBSCRIBED AND SWORN to before m	e this , affiant exh	ibiting his/her validly issued government ID as indicated above.				
	Person Administering (	Dath				