

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	BENGALAN			
FIRST NAME	GLYDEL	NAME EXTENSION (JR., SR)		
MIDDLE NAME	TERO			
3. DATE OF BIRTH (mm/dd/yyyy)	01/07/2000	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	BAYBAY CITY, LEYTE	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:			
7. HEIGHT (m)	1.63	17. RESIDENTIAL ADDRESS	ZONE 4	
8. WEIGHT (kg)	55.0		House/Block/Lot No.	Street
9. BLOOD TYPE	N/A		PATAG	Barangay
10. GSIS ID NO.	N/A		BAYBAY	LEYTE
11. PAG-IBIG ID NO.	N/A	ZIP CODE	Province	
12. PHILHEALTH NO.	13-202844920-1	18. PERMANENT ADDRESS	ZONE 4	
13. SSS NO.	N/A		House/Block/Lot No.	Street
14. TIN NO.	N/A		PATAG	Barangay
15. AGENCY EMPLOYEE NO.	N/A		BAYBAY	LEYTE
19. TELEPHONE NO.	N/A	ZIP CODE	Province	
20. MOBILE NO.	09323753369	6606		
21. E-MAIL ADDRESS (if any)	glydelbengalan@gmail.com			

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	BENGALAN			
FIRST NAME	EDUARDO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	POLIQUIT			
25. MOTHER'S MAIDEN NAME				
SURNAME	TERO			
FIRST NAME	BRENDA			
MIDDLE NAME	HORTELANO		(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	PATAG ELEMENTARY SCHOOL	PRIMARY EDUCATION	2006	2012	N/A	2012	SALUTATORIAN
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL / VISAYAS STATE UNIVERSITY SENIOR HIGH SCHOOL	SECONDARY EDUCATION	2012	2018	N/A	2018	CLASS HONORS
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BS CHEMISTRY	2018	2022	N/A	2022	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

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

[illegible]

(Continue on separate sheet if necessary)

<i>SIGNATURE</i>		<i>DATE</i>	
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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		
	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

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			
	GC-MS SYSTEMS: PRINCIPLES AND APPLICATIONS	20/05/2021	20/05/2021	1.5	TECHNICAL	SHIMADZU PHILIPPINES CORPORATION
	LC-MS SYSTEMS: PRINCIPLES AND APPLICATIONS	27/05/2021	27/05/2021	1.5	TECHNICAL	SHIMADZU PHILIPPINES CORPORATION
	FUNDAMENTALS OF CHROMATOGRAPHY	22/04/2021	22/04/2021	1.5	TECHNICAL	SHIMADZU PHILIPPINES CORPORATION

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	COMPUTER SKILL		N/A		
	SINGING		N/A		PATAG MUSIC MINISTRY

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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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: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.									
NAME	ADDRESS	TEL. NO.											
<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 style="padding: 2px;">Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td style="padding: 2px;"><i>PLEASE INDICATE ID Number and Date of Issuance</i></td> </tr> <tr> <td style="padding: 2px;">Government Issued ID:</td> </tr> <tr> <td style="padding: 2px;">ID/License/Passport No.:</td> </tr> <tr> <td style="padding: 2px;">Date/Place of Issuance:</td> </tr> </table>	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)	<i>PLEASE INDICATE ID Number and Date of Issuance</i>	Government Issued ID:	ID/License/Passport No.:	Date/Place of Issuance:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 100px; vertical-align: bottom; padding: 5px;"> <div style="border: 1px solid black; width: 100%; text-align: center; margin-top: 10px;">Signature (Sign inside the box)</div> </td> </tr> <tr> <td style="padding: 5px;">Date Accomplished</td> </tr> </table>	<div style="border: 1px solid black; width: 100%; text-align: center; margin-top: 10px;">Signature (Sign inside the box)</div>	Date Accomplished	<div style="border: 1px solid black; padding: 10px; text-align: center; margin-bottom: 10px;"> <p>ID picture taken within the last 6 months 4.5 cm. X 3.5 cm (passport size)</p> <p>Computer generated or photocopied picture is not acceptable</p> </div> <p style="text-align: center;">PHOTO</p> <div style="border: 1px solid black; height: 100px; margin-top: 10px;"></div> <p style="text-align: center;">Right Thumbmark</p>				
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Date Accomplished													
<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: 300px; height: 60px; margin: 10px auto;"></div> <div style="border: 1px solid black; width: 200px; text-align: center; margin: 5px auto;"> <p>Person Administering Oath</p> </div>													