

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	GONTENIAS		
FIRST NAME	MICA	NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	MAPA		
3. DATE OF BIRTH (mm/dd/yyyy)	11/01/1998	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	HILCTOGAN KANANGA LEYTE	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
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"/> Other/s:	17. RESIDENTIAL ADDRESS	N/A N/A House/Block/Lot No. Street N/A HILCTOGAN Subdivision/Village Barangay KANANGA LEYTE City/Municipality Province 6531
7. HEIGHT (m)	1.64	18. PERMANENT ADDRESS	N/A N/A House/Block/Lot No. Street N/A HILCTOGAN Subdivision/Village Barangay KANANGA LEYTE City/Municipality Province 6531
8. WEIGHT (kg)	41	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	O+	20. MOBILE NO.	09154250319
10. GSIS ID NO.	N/A	21. E-MAIL ADDRESS (if any)	mcgntns000@gmail.com
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	N/A		
13. SSS NO.	N/A		
14. TIN NO.	N/A		
15. AGENCY EMPLOYEE NO.	N/A		

II. FAMILY BACKGROUND

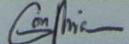
22. SPOUSE'S SURNAME	N/A		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	N/A	N/A	N/A	N/A
OCCUPATION	N/A		N/A	N/A
EMPLOYER/BUSINESS NAME	N/A		N/A	N/A
BUSINESS ADDRESS	N/A		N/A	N/A
TELEPHONE NO.	N/A		N/A	N/A
24. FATHER'S SURNAME	GONTENIAS		N/A	N/A
FIRST NAME	CLIMACO	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	MERA FUENTES	N/A	N/A	N/A
25. MOTHER'S MAIDEN NAME			N/A	N/A
SURNAME	MAPA		N/A	N/A
FIRST NAME	MARIBETH		N/A	N/A
MIDDLE NAME	SINGCOL		N/A	N/A

(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	HILCTOGAN ELEMENTARY SCHOOL	PRIMARY EDUCATION	2005	2011	N/A	2011	THIRD HONOR
SECONDARY	LIMAO NATIONAL HIGH SCHOOL	HIGH SCHOOL	2011	2015	N/A	2015	WITH HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY-BAYBAY	BS AGRIBUSINESS	2015	2019	N/A	2019	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/08/2020
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[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE

DATE _____

11/08/2020

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
	N / A	N / A	N / A	N / A	N / A
	N / A	N / A	N / A	N / A	N / A
	N / A	N / A	N / A	N / A	N / A
	N / A	N / A	N / A	N / A	N / A
	N / A	N / A	N / A	N / A	N / A
	N / A	N / A	N / A	N / A	N / A

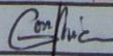
(Continue on separate sheet if necessary)

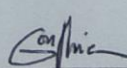


VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED						
Start from the most recent L&D training program and include only the relevant L&D training taken for the last five (5) years for Division Chief/Executive/Managerial positions)						
30.	TITLE OF LEARNING AND DEVELOPMENT 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			
	STRATEGIZING THE INCLUSIVE GROWTH OF THE COCO AND CACAO INDUSTRY IN THE NEXT FIVE YEARS, NORTHWESTERN LEYTE	12/06/2019	12/07/2019	16 HOURS	TECHNICAL	KANANGA KANIB AGRICULTURE COOPERATIVE
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A

(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)
	LEADERSHIP SKILLS		N/A		VSU ALUMNI ASSOCIATION
	INTERPERSONAL SKILLS		N/A		GOSPEL OF THE LIVING CHRIST YOUTH ORGANIZATION
	TECHNICAL WRITING		N/A		VSU STUDENT LEADERS IN CAMPUSES
	ANALYTICAL SKILLS		N/A		SOCIETY OF AGRIBUSINESS STUDENTS
	MICROSOFT OFFICE		N/A		COLLEGE OF MANAGEMENT AND ECONOMICS, VSU
	COMMUNICATION SKILLS		N/A		UNIVERSITY SUPREME STUDENT COUNCIL, VSU
	SINGING AND TRAVELLING		N/A		SEEDS OF FAITH YOUTH MINISTRY
(Continue on separate sheet if necessary)					

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/08/2020
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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: <u>N/A</u></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: <u>N/A</u></p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: <u>N/A</u></p> <p>Date Filed: <u>N/A</u></p> <p>Status of Case/s: <u>N/A</u></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: <u>N/A</u></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: <u>N/A</u></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: <u>N/A</u></p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: <u>N/A</u></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): <u>N/A</u></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: <u>N/A</u></p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: <u>N/A</u></p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: <u>N/A</u></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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>ROSALINA P. SUPERALES</td> <td>HILOCTOGAN KANANGA LEYTE</td> <td>09061990895</td> </tr> <tr> <td>ALJUN D. PIANO</td> <td>HILOCTOGAN KANANGA LEYTE</td> <td>09173249492</td> </tr> <tr> <td>REYMUNDO S. SUA</td> <td>HILOCTOGAN KANANGA LEYTE</td> <td>09305626973</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	ROSALINA P. SUPERALES	HILOCTOGAN KANANGA LEYTE	09061990895	ALJUN D. PIANO	HILOCTOGAN KANANGA LEYTE	09173249492	REYMUNDO S. SUA	HILOCTOGAN KANANGA LEYTE	09305626973
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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>													
<p>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</p> <p>PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: <u>PRC</u></p> <p>ID/License/Passport No.: <u>0032664</u></p> <p>Date/Place of Issuance: <u>12/03/2019</u></p>	<p></p> <p>Signature (Sign inside the box)</p> <p><u>11/08/2020</u></p> <p>Date Accomplished</p>												
<p></p> <p>MICA M. GONTENIAS</p> <p></p> <p>Right Thumbmark</p>													
<p>SUBSCRIBED AND SWORN to before me this <u>8TH DAY OF NOVEMBER, 2020</u>, 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> <p style="text-align: center;">Person Administering Oath</p>													