PERSONAL DATA SHEET									
WARNING Anymisrepresent	tation made in the Personal Data Sheet a	and the Work Experience	e Sheet shal	Cause the fi	ling of a	dministrative/	'criminal cas	e/s against	
the person concerned. READTHE ATTACHED CUIDE TOFILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS F <u>ORM</u>									
Print legibly. Tick appropris	e boxes ( ) and use separate sheet i	if necessary. Indicate N	V/A if not an	policable, 01.	CSIDN	(Do not	fill up. For C	SC use only)	
2. SURNAME	ONDE								
FIRST NAME	JOBELLE			-		NAMEEXTENSION	N (JR, SF)		
MIDDLE NAME	ALBURO								
3. DATE OF BIRTH	9/11/1997	16. CITIZENSHIP				FILIPINO	)		
(mm/dd/yyyy)	2) 11/1227	10. Grazzitoria					,		
4. PLACE OF BIRTH	HILAPNITANBAYBAY CITY, LEYE	If holder of dual citiz	dual citizenship, N/A Pls. indicate o			cate country	y:		
5. SEX	FEMALE	please indicate the	icate the details.						
6 CIVIL STATUS	SINGLE	17. RESIDENTIAL ADDRE				ZONE 5			
			HIL		Street IILAPNITAN	LAPNITAN			
7. HEIGHT (m)	1.651		Subdivision/Village BAYBAY			Barangay LEYTE			
B. WEIGHT (kg)	50	ZIP CODE	Citv	Municipality		6521	Province		
9. BLOOD TYPE		18. PERMANENT ADDRE					ZONE 5	ZONE 5	
	NIA .		House	/Block/Lot N	0.	h	Street HLAPNITAN	Street	
I O. GSIS ID NO.	NA NA		Subd	livision/Village BAYBA	_		Barangay LEYTE		
I 1. PAGIBIGID NO.	918255826025		City	/Municipality			Province		
2. PHILHEALTH NO.	1325-0369-1225	ZIP CODE		6521					
3. SSS NO.	06-4182040-3	19. TELEPHONE NO.				N/A			
14. TIN NO.		20. MOBILE NO.	Γ	09262330012/09362301765					
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if a		ojobelle6@gmail.com					
II. FAMILY BACKGRO				2 11 20Ch /			DATE	- 70071	
22 SPOUSE'S SURNAME	N/A		23. NAME o list all)	FCHILDREN (	(Write 1u	ıll name ano	DATE U	F BIRTH Id/yyy)	
		NAME OF TONIGON (ID 95)		N/A					
FIRST NAME	N/A	NAME EXTENSION (JR, SF)		- NA				/A	
MIDDLE NAME	N/A	NAMEEXTENSION (JR, SP)		- NA					
MIDDLE NAME OCCUPATION	N/A N/A	NAME EXTENSION (JR, SR)		- NA					
MIDDLE NAME  CCCUPATION  EMPLOYER/BUSINESS NA	N/A N/A N/A	NAMEEXTENSION (JR, SP)		- NA					
MIDDLE NAME  OCCUPATION  EMPLOYER/BUSINESS NA  BUSINESS ADDRESS	N/A N/A N/A	NAMEEXTENSION (JR, 99)		NA.					
MIDDLE NAME  COCUPATION  EMPLOYER/BUSINESS NA  BUSINESS ADDRESS  TELEPHONE NO.	N/A N/A N/A N/A	NAMEEXTENSION (.R. 99)		NA.					
MDOLE NAME OCCUPATION EMPLOYER/BUSINESS N/ BUSINESS ADDRESS TELEPHONE NO. 24 ATHERS SURNAME	N/A N/A N/A N/A N/A N/A ONDE			NA.					
MDDLE NAME  COCUPATION  EMPLOYER/BUSINESS N/ BUSINESS ADDRESS  TELEPHONE NO.  24 ATHERS SURNAME  FIRST NAME	N/A N/A N/A N/A N/A N/A ONDE	NAMEDATENSION (R. 99)		NA.					
MDDLE NAME  COCUPATION  EMPLOYER/BUSINESS N/ BUSINESS ADORESS  TELEPHONE NO.  24 ATHER'S SURNAME  FIRST NAME  MDDLE NAME	N/A N/A N/A N/A N/A N/A ONDE BNOC NOYA			NA					
MDDLE NAME  COCUPATION  EMPLOYER/BUSINESS N/ BUSINESS ADORESS  TELEPHONE NO.  24 ATHER'S SURNAME  FIRST NAME  MDDLE NAME  25 MOTHER'S MADEN NAME	N/A N/A N/A N/A N/A N/A ONDE BNOC NOYA			NA.					
MDDLE NAME  COCUPATION  EMPLOYER/BUSINESS NA  BUSINESS ADDRESS  TELEPHONE NO.  24 ATHER'S SURNAME  FIRST NAME  MDDLE NAME  25 MOTHER'S MADEN NAME  SURNAME	N/A N/A N/A N/A N/A N/A ONDE BNOC NOYA			NA NA					
MDDLE NAME  COCUPATION  EMPLOYER/BUSINESS NA  BUSINESS ADDRESS  TELEPHONE NO.  24 ATHER'S SURNAME  FIRST NAME  MODULE NAME  25 MOTHER'S MADEN NAME  SURNAME  FIRST NAME	N/A N/A N/A N/A N/A N/A N/A ONDE BNOC NOYA   ALBURO VIOLETA			No.			N		
MIDDLE NAME  COCUPATION  EMPLOYER/BUSINESS IN  BUSINESS ADORESS  TELEPHONE NO.  24 ATHER'S SURNAME  FIRST NAME  MODULE NAME  25 MOTHER'S MADEN NAME  SURNAME  FIRST NAME  MODULE NAME	N/A N/A N/A N/A N/A N/A N/A ONDE BNOC NOYA  E ALBURO VIOLETA ASSONG			(Continue of	on sepai	rate sheet if n	N		
MDDLE NAME  COCUPATION  EMPLOYER/BUSINESS NA  BUSINESS ADDRESS  TELEPHONE NO.  24 ATHER'S SURNAME  FIRST NAME  MODULE NAME  25 MOTHER'S MADEN NAME  SURNAME  FIRST NAME  MODULE NAME  THE ST NAME  MODULE NAME  MODULE NAME	N/A N/A N/A N/A N/A N/A N/A ONDE BNOC NOYA   ALBURO VIOLETA ASONG BACKGROUND	NAME EXTENSION (R. 99)		PEROD C	DF .	rate sheet if ri	N N	SCHOLAR9HIP	
MDDLE NAME  COCUPATION  EMPLOYER/BUSINESS N/ BUSINESS ADORESS  TELEPHONE NO.  24 ATHERS SURNAME  FIRST NAME  MODLE NAME  SURNAME  FIRST NAME  MODLE NAME  MODLE NAME	N/A N/A N/A N/A N/A N/A N/A ONDE BNOC NOYA  E ALBURO VIOLETA ASSONG		EE/COURSE	PERIOD C ATTENDAN	DF .		N	VA	
MDDLE NAME  COCUPATION  EMPLOYER/BUSINESS NA  BUSINESS ADDRESS  TELEPHONE NO.  24 ATHER'S SURNAME  FIRST NAME  MODULE NAME  25 MOTHER'S MADEN NAME  SURNAME  FIRST NAME  MODULE NAME  THE ST NAME  MODULE NAME  MODULE NAME	N/A N/A N/A N/A N/A N/A N/A ONDE ENOC NOYA  E ALBURO VIOLETA ASONG BACKGROUND	NAMEDATIPISON (JR. 59)  BASIC EDUCATION / DEGR	EE/COURSE	PERIOD C ATTENDAN	OF NCE	HIGHEST LEVEL/ UNITS EARNED	N N N N N N N N N N N N N N N N N N N	SCHOLARSHIP ACADBAIC HONORS RECEVED	
MIDLE NAME  COCLPATION  EMPLOYER/BUSINESS NA  BUSINESS ADDRESS  TELEPHONE NO.  24 ATHER'S SURNAME  FIRST NAME  MIDDLE NAME  22 MOTHER'S MADEN NAME  SURNAME  FRST NAME  MIDDLE NAME  ADDLE NAME  ADDLE NAME  ADDLE NAME  LEVEL	N/A N/A N/A N/A N/A N/A N/A ONDE BNOC NOYA     ALBURO VIOLETA ASONG  BAOKGROUN/D  NAME OF SCHOOL (Write in full)	NAMEDITIPSION (R. 9)  BASIC EDUCATION / DEGR	EE/COURSE	PERIOD C ATTENDAN	OF NCE	HIGHEST LEVEL/ UNITS EARNED	Necessary)	SCHOLARSHIP ACADEMIC HONOIR RECEIVED	
MDDLE NAME  COCUPATION  EMPLOYER/BUSINESS N/ BUSINESS ADORESS  TELEPHONE NO.  24 ATHERS SURNAME  FIRST NAME  MDDLE NAME  25 MOTHERS MADEN NAME  SURNAME  FIRST NAME  MDDLE NAME  ADDLE NAME  LEVEL  ELEMENTARY	N/A N/A N/A N/A N/A N/A N/A N/A ONDE BNOC NOYA  E ALBURO VIOLETA ASONG BAOKGROUND NAME OF SCHOOL (Write in full) HLAPNITAN ELEMENTARY SCHOOL	NAMEDATIONO(JR, SI)  BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD C ATTENDAN	OF NCE	HIGHEST LEVEL/ UNITS EARNED	N N N N N N N N N N N N N N N N N N N	SCHOLARSHIP ACADBHIP HONORS RECEIVED	
MIDLE NAME  COCUPATION  EMPLOYER/BUSINESS NA  BUSINESS ADDRESS  TELEPHONE NO.  24 ATHER'S SURNAME  FIRST NAME  MIDCLE NAME  22 MOTHER'S MADEN NAME  SURNAME  FRST NAME  MIDCLE NAME  ADDLE NAME  LEVEL  ELEMENTARY  SECONDARY  VOCATIONAL /	N/A N/A N/A N/A N/A N/A N/A N/A N/A ONDE ENOC NOYA  E ALBURO VIOLETA ASONG SAGKGROUND NAME OF SCHOOL (Write in full) HLAPNITAN ELEMENTARY SCHOOL DAMLLAAN NATIONAL HIGH SCHOOL	NAMEEXTENSION (.R. SP)  BASIC EDUCATION / DEGREE (Write in full)  N/A  N/A	) ENCE IN	PERIOD C ATTENDAN	OF NCE	HIGHEST LEVEL/ UNITS EARNED	No.	SCHOLARSHIP, ACADEMIC HONORS RECEIVED With Honor	
MIDDLE NAME  COCUPATION  EMPLOYER/BUSINESS N.  BUSINESS ADDRESS  TELEPHONE NO.  24.ATHER'S SURNAME  FIRST INAME  MIDDLE NAME  25. MOTHER'S MADEN NAME  FIRST NAME  MIDDLE NAME  1. EDUCATIONAL  ELEMENTARY  SECONDARY  VOCATIONAL  TRAGE COURSE	N/A N/A N/A N/A N/A N/A N/A N/A ONDE ENOC NOYA  E ALBURO VIOLETA ASONG BAOKGROUND NAME OF SCHOOL (Write in full) HILAPNITAN ELEMENTARY SCHOOL DAMLLAAN NATIONAL HIGH SCHOOL	BASIC EDUCATION/DEGR (Write in full)	) ENCE IN	PERIOD C ATTENDAN	OF NCE	HIGHEST LEVEL/ UNITS EARNED	N N N N N N N N N N N N N N N N N N N	SCHOLARS-IP, ACADMIC HONORS PUBLISH HONOR NVA	
MDDLE NAME  COCUPATION  EMPLOYER/BUSINESS NA  BUSINESS ADDRESS  TELEPHONE NO.  24 ATHERS SURNAME  FIRST NAME  MODLE NAME  25 MOTHERS MADEN NAME  FIRST NAME  MODLE NAME  1	N/A	BASIC EDUCATION/DEGR (Write in full)	NOE IN	PERIOD C ATTENDAN	OF NCE	HIGHEST LEVEL/ UNITS EARNED	N N N N N N N N N N N N N N N N N N N	SCHOLARSHIP ACADABILIC HONORS RECEIVED With HONOR N/A N/A N/A	

CSFORM212 (Revised 2017), Page 1 o

IV. CIVIL SERVICE ELIGIBILITY									
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Ap.		RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINAT	ΓΙΟΝ / CONFE	RMENT	LICENSE (if ap	pplicable)  Date of  Validity	
	N/A	1							validity
				-					
						-	-		
						-	-		
				-		-	-		
						-			
			(Cor.	ntinue on separate sheet	if necessary)				
	XPERIENCE					ob ad 14/auls [	Typ orion oo ob	a a t	
	sive dates	ent. Start from your rece	m work) Descriptii	on or ountes should	ve novaleo n'interitat	THEO VVOIK E			
(mm	n/dd/yyyy)	POSITION T (Write in full/Do not		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARY/JOB/PAY GRADE (if applicable)& STEP (Format "00 -0")/INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/ N)
September of	February of	ACCOUNT OF	FICER	CARD	BANK, INC.				
May of 2021	2019 December of	GIP- HERO SU		DEPARTMEN	T OF LABOR AND			CONTRACT	
<u> </u>	2021			EMP	LOYMENT			OF SERVICE	
,				_					
		,		,					
		,							
		,							
		,							
		,							
,									
		,							
					·				
			(Cor	ntinue on separate sheet	if necessary)				
SIGNA	ATURE		1001	In separate or rect	DATE		MAY 11,2023	DM 212 (Devised 201	

VI. VOLUNTARY WORK OR INVOLV	EMENT IN CIVIC / NON-GO	VERNMEN'	T/PEOPLE,	/ VOLUNTAF	RY ORGANIZ	ATION/S
NAME & ADDRESS OF OI (Write in full			VE DATES ld/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK	
N/A		110				
	,					
VII. LEARNING AND DEVELOPME	(Con NT (L&D) INTERVENTIONS/	ntinue on separa /TRAINING I	ite sheet if nece PROGRAMS	e <mark>ssary)</mark> S ATTENDEL	)	
TITLE OF LEARNING AND DEVELOPMENT INTI (Write in full	ERVENTIONS/TRAINING PROGRAMS	INCLUSIVE	DATES OF DANCE	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
N/A						
						, ,
-						,
-						,
						,
						,
						,
						, ,
						,
						,
						,
	(Con	ntinue on separa	te sheet if nece	essary)		
VIII. OTHER INFORMATION						
SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
CAN SING	N/A					N/A
LISTENING MUSIC/ CAN PLAY GUITAR BASIC CHORDS				-		
CAN COOK			_			
SIGNATURE	(Con	ntinue on separa	nte sheet if nece		ATE	MAY 11,2023

chief of bureau or office or to the person who has imr Bureau or Department where you will be apppointed, a. within the third degree?						
b. within the fourth degree (for Local Government Uni	NO If YES, give details:					
35. a. Have you ever been found guilty of any administrat	NO  If YES, give details:					
b. Have you been criminally charged before any court	NO If YES, give details: Date Filed: Status of Case/s:					
36. Have you ever been convicted of any crime or violation regulation by any court or tribunal?	NO If YES, give details:					
37. Have you ever been separated from the service in any retirement, dropped from the rolls, dismissal, terminat phased out (abolition) in the public or private sector?		If YES, give details: FINISHEI				
38. a. Have you ever been a candidate in a national or loca (except Barangay election)?	NO If YES, give details:					
b. Have you resigned from the government service du the last election to promote/actively campaign for a n	If YES, give details:					
39. Have you acquired the status of an immigrant or perm	nanent resident of another country?	NO If YES, give details (coun	ntry):			
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (	b) Magna Carta for Disabled Persons		<u> </u>			
(RA 7277); and (c) Solo Parents Welfare Act of 2000 (litems:  a. Are you a member of any indigenous group?	RA 8972), please answertne tollowing	NO				
.,,,,		If YES, please specify:				
b. Are you a person with disability?		NO If YES, please specify ID No:				
c. Are you a solo parent?		NO If YES, please specify ID No:				
41. REFERENCES (Person not related by consanguinity or affinity to	applicant /appointee)					
NAME	ADDRESS	TEL. NO.	ID picture taken within the last 6 months 4.5 cm. X 3.5 cm			
			(passport size)			
			Computer generated or photocopied picture is not acceptable			
			із пот ассертаціе			
42. I declare under oath that I have personally accomplish and complete statement pursuant to the provisions o						
of the Philippines. I authorize the agency head/autho	rized representative to verify/validate th	e contents				
stated herein. I agree that any misrepresentation cause the filing of administrative/criminal case/s again	made in this document and its attachm nst me.	nents snall	РНОТО			
Government Issued ID (i.e.Passport, GSIS,SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance		11				
Government Issued ID:						
ID/License/Passport No.	Signature (Sign inside the I	box)				
Date/Place of Issuance:	Date Accomplished		Right Thumbmark			
SUBSCRIBED AND SWORN to before me this—		his/her validly issued governr	ment ID as indicated above.			
Г						
	Pomon Administrative - O	oth				
L	Person Administering Oa	alli				

Yes/No Cstat Gender Yes Single Male No Married Female Separated

Separated Widowed