

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	Sabares		
FIRST NAME	Jemiah	NAME EXTENSION (JR., SR)	
MIDDLE NAME	Bernal		
3. DATE OF BIRTH (mm/dd/yyyy)	03/29/2002	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	Ormoc City	If holder of dual citizenship, please indicate the details.	Philippines ▼
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	17. RESIDENTIAL ADDRESS	Zone 3 House/Block/Lot No. _____ Street _____ Tabgas Subdivision/Village _____ Barangay _____ Albuera Leyte City/Municipality _____ Province _____
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: _____	ZIP CODE	6542
7. HEIGHT (m)	1.54	18. PERMANENT ADDRESS	Zone 3 House/Block/Lot No. _____ Street _____ Tabgas Subdivision/Village _____ Barangay _____ Albuera Leyte City/Municipality _____ Province _____
8. WEIGHT (kg)	56	ZIP CODE	6542
9. BLOOD TYPE		19. TELEPHONE NO.	
10. GSIS ID NO.		20. MOBILE NO.	09959632005/09624107720
11. PAG-IBIG ID NO.		21. E-MAIL ADDRESS (if any)	jemiasabares303@gmail.com
12. PHILHEALTH NO.			
13. SSS NO.			
14. TIN NO.			
15. AGENCY EMPLOYEE NO.			

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	Orge			
FIRST NAME	Demencio	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Andriano			
25. MOTHER'S MAIDEN NAME				
SURNAME	Orge			
FIRST NAME	Lorena			
MIDDLE NAME	Sabares			

(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	Tabgas Elementary School					2014	with honor
SECONDARY	Dr.Geronimo B.Zaldivar Memorial School of Fisheries					2018	
VOCATIONAL / TRADE COURSE	Dr.Geronimo B.Zaldivar Memorial School of Fisheries	Technical-Vocational-Livelihood (TVL)				2020	with honor
COLLEGE	Visayas State University	Bachelor of Science in Agribusiness				2024	Cum Laude
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	February 9, 2025
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[illegible]

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

[illegible]

SIGNATURE		DATE	09/02/2025
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

[illegible][illegible]





(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)
Proficient in Microsoft Office Suite		
Excellent Communication Skills		
Problem-Solving Skills		
Reading		
Flexibility and Adaptability		
Detail Oriented		

(Continue on separate sheet if necessary)

(continue on separate sheet if necessary)			
SIGNATURE		DATE	09/02/2025

<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> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>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: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">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>													
<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: 4960-4813-7503-2840 July 21, 2021</p> <p>ID/License/Passport No.: _____</p> <p>Date/Place of Issuance: _____</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; height: 80px;">  </td> </tr> <tr> <td style="text-align: center;"> <p>Signature (Sign inside the box)</p> <p>09/02/2025</p> <p>Date Accomplished</p> </td> </tr> </table>		<p>Signature (Sign inside the box)</p> <p>09/02/2025</p> <p>Date Accomplished</p>	<div style="text-align: center;">  <p>PHOTO</p> </div> <div style="border: 1px solid black; height: 100px; margin-top: 20px; text-align: center;"> <p>Right Thumbmark</p> </div>									
													
<p>Signature (Sign inside the box)</p> <p>09/02/2025</p> <p>Date Accomplished</p>													
<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; text-align: center;"> <p>Person Administering Oath</p> </div>													