

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.

I. PERSONAL INFORMATION


2. SURNAME	Acampado		
FIRST NAME	Giselle		NAME EXTENSION (JR., SR)
MIDDLE NAME	Albotra		
3. DATE OF BIRTH (mm/dd/yyyy)	JANUARY 04, 1997	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	BRGY. TACURANGA PALO, LEYTE	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		Pls. indicate country:
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	ZONE 5
7. HEIGHT (m)	157 cm	ZIP CODE	House/Block/Lot No. Street
8. WEIGHT (kg)	86 kilograms		Subdivision/Village Barangay
9. BLOOD TYPE	B POSITIVE		PALO LEYTE
10. GSIS ID NO.			City/Municipality Province
11. PAG-IBIG ID NO.	1212-4987-0325		
12. PHILHEALTH NO.	12-051446420-6	18. PERMANENT ADDRESS	ZONE 5
13. SSS NO.	06-3714359-2	ZIP CODE	House/Block/Lot No. Street
14. TIN NO.	749-752-281-00000		Subdivision/Village Barangay
15. AGENCY EMPLOYEE NO.			PALO LEYTE
			City/Municipality Province
19. TELEPHONE NO.			
20. MOBILE NO.	09469230949		
21. E-MAIL ADDRESS (if any)	acampadogiselle@gmail.com		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Acampado		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Arian	NAME EXTENSION (JR., SR)	Yesenia Astrid Albotra Acampado	August 05, 2020
MIDDLE NAME	Gula			
OCCUPATION	Assistant Professor I			
EMPLOYER/BUSINESS NAME	Visayas State University Tolosa			
BUSINESS ADDRESS	Tolosa, Leyte			
TELEPHONE NO.				
24. FATHER'S SURNAME	Albotra			
FIRST NAME	Romulo	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Conde			
25. MOTHER'S MAIDEN NAME				
SURNAME	Tapales			
FIRST NAME	Evelyn			
MIDDLE NAME	Barbosa		(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	Naga-Naga Elementary School		2003	2009		2009	Valedictorian
SECONDARY	Palo National High School		2009	2013		2013	Valedictorian
VOCATIONAL / TRADE COURSE							
COLLEGE	St. Scholastica's College Tacloban		2013	2018		2018	Magna Cum Laude
GRADUATE STUDIES							

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	10/17/2024

#### IV. CIVIL SERVICE ELIGIBILITY

[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)

SIGNATURE		DATE	10/17/2024
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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, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
35. a. Have you ever been found guilty of any administrative offense?  b. Have you been criminally charged before any court?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?  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?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>												
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: a. Are you a member of any indigenous group?  b. Are you a person with disability?  c. Are you a solo parent?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)													
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>Katrina Frances Busi</td><td></td><td>9662536939</td></tr><tr><td>Rodney H. Surpia</td><td>Tacloban City</td><td>9707059469</td></tr><tr><td>Angelito Narciso</td><td>Tacloban City</td><td>9953223120</td></tr></table>		NAME	ADDRESS	TEL. NO.	Katrina Frances Busi		9662536939	Rodney H. Surpia	Tacloban City	9707059469	Angelito Narciso	Tacloban City	9953223120
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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.													
<div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: PRC</div> <div>ID/License/Passport No.: 0094520</div> <div>Date/Place of Issuance: TACLOBAN CITY</div>	<div><div>Signature (Sign inside the box)</div><div>10/17/24</div><div>Date Accomplished</div></div> <div>Right Thumbmark</div>												
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.													
<div>Person Administering Oath</div>													