

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	RAMIREZ		
FIRST NAME	SEAN EDUARD	NAME EXTENSION (JR, SR)	N/A
MIDDLE NAME	PICSON		
3. DATE OF BIRTH (mm/dd/yyyy)	11/17/1997	18. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country: N/A
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input 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:	17. RESIDENTIAL ADDRESS	N/A R.V. FULACHE House/Block/Lot No. Street N/A EASTERN Subdivision/Village Barangay HILONGOS LEYTE City/Municipality Province
7. HEIGHT (m)	1.73	ZIP CODE	6524
8. WEIGHT (kg)	70	18. PERMANENT ADDRESS	N/A R.V. FULACHE House/Block/Lot No. Street N/A EASTERN Subdivision/Village Barangay HILONGOS LEYTE City/Municipality Province
9. BLOOD TYPE	B+	ZIP CODE	6524
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	121333389747		
12. PHILHEALTH NO.	13-250501066-7		
13. SSS NO.	06-4613880-2	19. TELEPHONE NO.	N/A
14. TIN NO.	777-961-146	20. MOBILE NO.	09504970080
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	ramirez.seaneducard17@gmail.com

II. FAMILY BACKGROUND

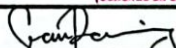
22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR, SR)	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	RAMIREZ			
FIRST NAME	EDUARDO	NAME EXTENSION (JR, SR)	N/A	
MIDDLE NAME	DELTRAN			
25. MOTHER'S MAIDEN NAME				
SURNAME	PICSON			
FIRST NAME	ANALIZA			
MIDDLE NAME	PIJOTO			

(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	GREUNA OSMENA CHRISTIAN COLLEGE	N/A	2005	2011	N/A	2011	5TH HONOR
SECONDARY	GREUNA OSMENA CHRISTIAN COLLEGE	N/A	2011	2015	N/A	2015	13TH HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN MECHANICAL ENGINEERING	2015	2020	N/A	2021	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	MAY 17, 2024
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[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	MAY 17, 2024
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[illegible]

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

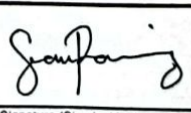
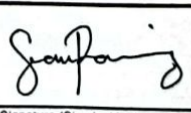
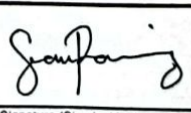
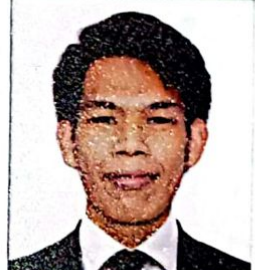

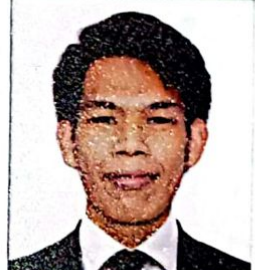

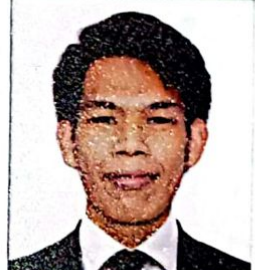

[illegible]

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
PHOTOGRAPHY	N/A	PHILIPPINE SOCIETY OF MECHANICAL ENGINEERS - LEYTE CHAPTER
VIDEO GAME		VISAYAS STATE UNIVERSITY ALUMNI ASSOCIATION, INCORPORATED
SPORTS		
MUSIC		
DANCE		
PLAYING INSTRUMENT		

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	MAY 17, 2024

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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> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: Date Filed: _____ 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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: <u>RESIGNATION FROM MY PREVIOUS EMPLOYMENT</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: _____</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>JAKE ERNEST BINUEZA</td> <td>ORMOC CITY, LEYTE</td> <td>N/A</td> </tr> <tr> <td>RAMIL VINCULADO</td> <td>HILONGOS, LEYTE</td> <td>N/A</td> </tr> <tr> <td>RAYMUND IECASAMA</td> <td>BAYBAY CITY, LEYTE</td> <td>N/A</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	JAKE ERNEST BINUEZA	ORMOC CITY, LEYTE	N/A	RAMIL VINCULADO	HILONGOS, LEYTE	N/A	RAYMUND IECASAMA	BAYBAY CITY, LEYTE	N/A
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RAMIL VINCULADO	HILONGOS, LEYTE	N/A											
RAYMUND IECASAMA	BAYBAY CITY, LEYTE	N/A											
<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>													
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<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: 200px; height: 40px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>													