

# 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, CS ID No.

(Do not fill up. For CSC use only)

## I. PERSONAL INFORMATION

2. SURNAME	RIM		
FIRST NAME	FLORDELIZA	N/A	
MIDDLE NAME	OBIAL		
3. DATE OF BIRTH (mm/dd/yyyy)	JANUARY 17, 1991	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	ALIMA, BACOR, CAVITE	If holder of dual citizenship, please indicate the details.	
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"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. _____ Street _____ Subdivision/Village _____ Barangay _____ BAYBAY _____ LEYTE _____ City/Municipality _____ Province _____
7. HEIGHT (m)	1.51	ZIP CODE	9521
8. WEIGHT (kg)	50 KG.		
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS	House/Block/Lot No. _____ Street _____ Subdivision/Village _____ Barangay _____ BAYBAY _____ LEYTE _____ City/Municipality _____ Province _____
10. GSIS ID NO.	N/A	ZIP CODE	
11. PAG-IBIG ID NO.	121247629633		
12. PHILHEALTH NO.	130501376842		
13. SSS NO.	34-1740504-6	19. TELEPHONE NO.	N/A
14. TIN NO.	359-526-818	20. MOBILE NO.	09161934637
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	<a href="mailto:nimflordeliza30@gmail.com">nimflordeliza30@gmail.com</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	N/A	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	RIM			
FIRST NAME	FLORENCIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	ESTELLORO			
25. MOTHER'S MAIDEN NAME				
SURNAME	OBIAL			
FIRST NAME	ERLINDA			
MIDDLE NAME	MANATAD			

(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	CIABU ELEMENTARY SCHOOL	PRIMARY EDUCATION	01/07/1997	30/03/2003	GRADUATED	2003	PASSED
SECONDARY	BAYBAY CITY NAT'L NIGHT HIGH SCHOOL	HIGH SCHOOL	01/07/2013	30/03/2014	GRADUATED	2014	FOURTH HONOR
VOCATIONAL / TRADE COURSE	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION	NCH FOOD AND BEVERAGES	21/10/2019	22/12/2018	GRADUATED	2019	DSWD SCHOLAR
COLLEGE	EVANGELICAL THEOLOGICAL COLLEGE OF THE PHILIPPINES	BACHELOR OF ARTS MAJOR IN CHRISTIAN EDUCATION	01/07/2014	23/03/2018	GRADUATED	2018	DEAN'S LIST
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE	DATE
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[illegible]

## WORK EXPERIENCE

[illegible]

SIGNATURE	DATE
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[illegible]

10. RESEARCH AND DEVELOPMENT AND INTERVENTIONS TRAINING PROGRAMS ATTENDED

INCLUSIVE DATES OF	TYPE OF
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(Continue on separate sheet if necessary)

NON-ACADEMIC DISTINCTIONS / RECOGNITION	MEMBERSHIP IN ASSOCIATION/ORGANIZATION
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(Continue on separate sheet if necessary)

DATE \_\_\_\_\_



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? ☐ YES ☒ NO

b. within the fourth degree (for Local Government Unit - Career Employees)? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

35. a. Have you ever been found guilty of any administrative offense? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

b. Have you been criminally charged before any court? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

Date Filed: \_\_\_\_\_

Status of Case/s: \_\_\_\_\_

36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

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? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

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? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

39. Have you acquired the status of an immigrant or permanent resident of another country? ☐ YES ☒ NO

If YES, give details (country): \_\_\_\_\_

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? ☐ YES ☒ NO

If YES, please specify: \_\_\_\_\_

b. Are you a person with disability? ☐ YES ☒ NO

If YES, please specify ID No: \_\_\_\_\_

c. Are you a solo parent? ☐ YES ☒ NO

If YES, please specify ID No: \_\_\_\_\_

41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)

NAME	ADDRESS	TEL. NO.
MR. DINDO B. LOPEZ	BAYBAY LEYTE	9285230884
MR. JASHER ANTHONY S. ROSELLO	BAYBAY LEYTE	9754215605
MECEIL AIZA T. MODINA	BAYBAY LEYTE	9676515417

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.



FLORDELIZA O. RIM

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)

PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: PRC LICENSE

ID/License/Passport No.: 1797908

Date/Place of Issuance: 09/24/19 PRC ORMOC ROBINSON

*[Signature]*

Signature (Sign inside the box)

Sept. 23, 2021

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath