

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	BAÑEZ		
FIRST NAME	JUDITH	NAME EXTENSION (JR., SR)	
MIDDLE NAME	CALVO		
3. DATE OF BIRTH (mm/dd/yyyy)	06/09/1990	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	MONTERRAT, PILAR, CEBU	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:		
7. HEIGHT (m)	1.575 m	17. RESIDENTIAL ADDRESS	F. ROCHA ST. House/Block/Lot No. Street MAKINHAS Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
8. WEIGHT (kg)	53kg	ZIP CODE	6521
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	F. ROCHA ST. House/Block/Lot No. Street MAKINHAS Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6521
11. PAG-IBIG ID NO.	121095972581	19. TELEPHONE NO.	N/A
12. PHILHEALTH NO.	130501189473	20. MOBILE NO.	09094966515
13. SSS NO.	06-3109393-6	21. E-MAIL ADDRESS (if any)	judithbanez18@yahoo.com
14. TIN NO.	438-399-584		
15. AGENCY EMPLOYEE NO.	00909		

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)	RHYLE JUDE B. CANO	05/10/2019
MIDDLE NAME			
OCCUPATION	N/A		
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME	BAÑEZ		
FIRST NAME	ALFONSO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	LANGRES	JR.	
25. MOTHER'S MAIDEN NAME			
SURNAME	CALBO		
FIRST NAME	EDITA		
MIDDLE NAME	MORQUIANOS		
(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	MONTERRAT ELEMENTARY SCHOOL	PRIMARY EDUCATION	1996	2002	N/A	2002	2ND HONORABLE MENTIONM
SECONDARY	DON FILOMENO M. TORRES MEMORIAL NATIONAL HIGH SCHOOL	SECONDARY EDUCATION	2002	2006	N/A	2006	3RD HONORABLE MENTIONM
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 STATISTICS	2006	2010	N/A	2010	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	NA/	NA/	N/A
(Continue on separate sheet if necessary)							
SIGNATURE		DATE					

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	N/A				

(Continue on separate sheet if necessary)

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

[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)
QUANTUM GIS (QGIS)		
ADOBE PHOTOSHOP		
SPSS	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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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)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: FINISH CONTRACT												
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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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? b. Are you a person with disability? c. Are you a solo parent?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____												
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>ENGR. PATRICK POSTRERO</td><td>CPDO- LGU, BAYBAY CITY, LEYTE</td><td>563-8988</td></tr><tr><td>CARLO S. ENRIQUEZ</td><td>LGU- BAYBAY CITY</td><td>9981552044</td></tr><tr><td>IRISH B. ORACAN</td><td>BAYBAY CITY, LEYTE</td><td>9553962414</td></tr></table>		NAME	ADDRESS	TEL. NO.	ENGR. PATRICK POSTRERO	CPDO- LGU, BAYBAY CITY, LEYTE	563-8988	CARLO S. ENRIQUEZ	LGU- BAYBAY CITY	9981552044	IRISH B. ORACAN	BAYBAY CITY, LEYTE	9553962414
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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.													
<table><tr><td>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID: TIN</td></tr><tr><td>ID/License/Passport No.: 438-399-584</td></tr><tr><td>Date/Place of Issuance: 07/11/2013 BIR, ORMOC CITY, LEYTE</td></tr></table>	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	Government Issued ID: TIN	ID/License/Passport No.: 438-399-584	Date/Place of Issuance: 07/11/2013 BIR, ORMOC CITY, LEYTE	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	Date Accomplished					
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SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.													
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