

## 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	FERNANDEZ		
FIRST NAME	ELENITA MAE		NAME EXTENSION (JR., SR.)
MIDDLE NAME	DADOR		
3. DATE OF BIRTH (mm/dd/yyyy)	JANUARY 16, 1999	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	MAHAPLAG, LEYTE	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 DALERON UGUIS Subdivision/Village Barangay MAHAPLAG LEYTE City/Municipality Province
7. HEIGHT (m)		ZIP CODE	6512
8. WEIGHT (kg)		18. PERMANENT ADDRESS	House/Block/Lot No. Street DALERON UGUIS Subdivision/Village Barangay MAHAPLAG LEYTE City/Municipality Province
9. BLOOD TYPE	N/A	ZIP CODE	6512
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	121270237204	20. MOBILE NO.	09510449803
12. PHILHEALTH NO.	1302-5555-6550	21. E-MAIL ADDRESS (if any)	elenitamae.fernandez88@gmail.com
13. SSS NO.	34-9367055-2		
14. TIN NO.	745-318-608		
15. AGENCY EMPLOYEE NO.			

## 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		N/A	N/A
OCCUPATION	N/A		N/A	N/A
EMPLOYER/BUSINESS NAME	N/A		N/A	N/A
BUSINESS ADDRESS	N/A		N/A	N/A
TELEPHONE NO.	N/A		N/A	N/A
24. FATHER'S SURNAME	FERNANDEZ		N/A	N/A
FIRST NAME	ISIDRO	NAME EXTENSION (JR., SR.)	N/A	N/A
MIDDLE NAME	TANAJORA		N/A	N/A
25. MOTHER'S MAIDEN NAME			N/A	N/A
SURNAME	DADOR		N/A	N/A
FIRST NAME	TERESITA		N/A	N/A
MIDDLE NAME	N/A		(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	SAN ISIDRO ELEMENTARY SCHOOL	PRIMARY EDUCATION	05/21/2005	03/06/2011	N/A	2011	N/A
SECONDARY	MAHAPLAG NATIONAL HIGH SCHOOL - LOWER CAMPUS	SECONDARY EDUCATION	08/07/2011	06/05/2015	N/A	2015	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY - MAIN CAMPUS	BACHELOR OF ARTS IN ENGLISH LANGUAGE	08/23/2015	06/14/2019	N/A	2019	CUM LAUDE
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY - MAIN CAMPUS	MASTER OF SCIENCE IN LANGUAGE TEACHING	03/20/2020	08/03/2023	N/A	2023	N/A

(Continue on separate sheet if necessary)

SIGNATURE

DATE

08/04/24

[illegible]

**V. WORK EXPERIENCE**

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

28.	INCLUSIVE DATES (mm/dd/yyyy)	POSITION TITLE	DEPARTMENT / AGENCY / OFFICE / COMPANY	MONTHLY	SALARY / JOB PAY GRADE (if available) STEP	STATUS OF EMPLOYMENT	GOVT SERVICE
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[illegible]

(Continue on separate sheet if necessary)			
SIGNATURE	<i>[Signature]</i>	DATE	08/04/24

8 empty

08/04/24



## V. VOLUNTARY WORK OR INVOLVEMENT IN CIVIL GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION

[illegible]

(Continue on separate sheet if necessary)

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

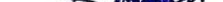
[illegible]

(Continue on separate sheet if necessary)

## VIII. OTHER INFORMATION

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
		08/04/24	



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)?

☐ YES ☒ NO

☐ 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.
ANNIE A. PARMIS	BAYBAY CITY, LEYTE	parmisannie@gmail.com
MARICAR POSAS	BAYBAY CITY, LEYTE	91551992609
SHEENA MAE P. LUBRIO	BAYBAY CITY, LEYTE	sheenamae.lubrio@vsu.edu.ph



ELENITA MAE D. FERNANDEZ

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.

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

PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: PASSPORT

ID/License/Passport No.: P3552033C

Date/Place of Issuance: 12 MAR 2023 DFA TACLOBAN

Signature (Sign inside the box)

08/04/24

Date Accomplished



SUBSCRIBED AND SWORN to before me this APR 24 2024, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. DECYROSE P. PAPA

Public Attorney II

(Pursuant to R.A. 9406)