

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	RYAN	NAME EXTENSION (JR., SR)		
MIDDLE NAME	TAN			
3. DATE OF BIRTH (mm/dd/yyyy)	3/28/1992	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	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	PUROK 1 ILAYA House/Block/Lot No. Street Subdivision/Village PANGASUGAN Barangay Baybay City Leyte City/Municipality Province 6521	
7. HEIGHT (m)	1.65 M	18. PERMANENT ADDRESS	PUROK 1 ILAYA House/Block/Lot No. Street Subdivision/Village PANGASUGAN Barangay Baybay City Leyte City/Municipality Province 6521-A	
8. WEIGHT (kg)	65 Kg		ZIP CODE	
9. BLOOD TYPE	A+		19. TELEPHONE NO.	N/A
10. GSIS ID NO.	N/A		20. MOBILE NO.	09073107991
11. PAG-IBIG ID NO.	12117180288	21. E-MAIL ADDRESS (if any)	ryanfernandez202028@gmail.com	
12. PHILHEALTH NO.	13-050172040-7			
13. SSS NO.	CRN-0111-8322782-2			
14. TIN NO.	478-624-273			
15. AGENCY EMPLOYEE NO.				

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	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	GUCELA		N/A	N/A
25. MOTHER'S MAIDEN NAME			N/A	N/A
SURNAME	TAN		N/A	N/A
FIRST NAME	ARCENIA		N/A	N/A
MIDDLE NAME	MANGCAO		(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	PANGASUGAN ELEMENTARY SCHOOL	PRIMARY EDUCATION	6/1/2002	3/31/2008	Graduated	2008	Second Honor
SECONDARY	ALTERNATIVE LEARNING SYSTEM	HIGH SCHOOL	6/10/2010	3/30/2011	Graduated	2011	N/A
VOCATIONAL /	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	Bachelor of Science In Agribusiness	6/1/2011	4/22/2015	Graduated	2015	N/A
SUPPLEMENTAL COURSE	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPCION	Supplementary 18 Education Units	7/8/2019	11/14/2019	Passed	2019	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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IV. CIVIL SERVICE ELIGIBILITY						
27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	License Professional Teacher	PASSED	09/26/2021	Tacloban City	20-3891188	03/28/2025
	Organic Agricultural Production NC II	PASSED	9/6/2019	GOLD Farm, Kanipa Baybay City	19083702020517	10/13/2024
	Agricultural Crop Production NC II	PASSED	9/6/2019	GOLD Farm, Kanipa Baybay City	19083702017746	9/8/2024

(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)

<i>SIGNATURE</i>		<i>DATE</i>	
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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> <hr/> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</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: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>NICK FREDDY R. BELLO</td> <td>VISCA, BAYBAY CITY</td> <td>9353256803</td> </tr> <tr> <td>OLIVER GERBOLINGO</td> <td>STA. CRUS, BAYBAY CITY</td> <td>9497608344</td> </tr> <tr> <td>WILMA NAPIERE</td> <td>BARANGAY GUADALUPE BAYBAY CITY</td> <td>9518512884</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	NICK FREDDY R. BELLO	VISCA, BAYBAY CITY	9353256803	OLIVER GERBOLINGO	STA. CRUS, BAYBAY CITY	9497608344	WILMA NAPIERE	BARANGAY GUADALUPE BAYBAY CITY	9518512884
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<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>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</th> </tr> <tr> <td style="width: 60%;">Government Issued ID:</td> <td>PhilHealth</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>13-050172040-7</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>Baybay City</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:	PhilHealth	ID/License/Passport No.:	13-050172040-7	Date/Place of Issuance:	Baybay City	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 40px; vertical-align: bottom; text-align: center;">Signature (Sign inside the box)</td> </tr> <tr> <td style="height: 40px; vertical-align: bottom; text-align: center;">Date Accomplished</td> </tr> </table>	Signature (Sign inside the box)	Date Accomplished		
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<div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p>ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size)</p> <p>With full and handwritten name tag and signature over printed name</p> <p>Computer generated or photocopied picture is not acceptable</p> </div> <div style="border: 1px solid black; height: 100px; width: 100%; margin-top: 10px;"></div>													
<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: 300px; height: 60px; margin: 10px auto; text-align: center; line-height: 60px;"> <p>Person Administering Oath</p> </div>													