

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. ☐ CS ID No. (Do not fill up. For CSC use only)

I. PERSONAL INFORMATION


2. SURNAME	Omega		
FIRST NAME	Daryl	NAME EXTENSION (JR., SR.)	
MIDDLE NAME	Hoyumpa		
3. DATE OF BIRTH (mm/dd/yyyy)	July 18, 2000	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	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 House/Block/Lot No. Street N/A San Isidro Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
7. HEIGHT (m)	167 cm	ZIP CODE	6521
8. WEIGHT (kg)	67kg	18. PERMANENT ADDRESS	N/A House/Block/Lot No. Street N/A San Isidro Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
9. BLOOD TYPE	O	ZIP CODE	6521
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	N/A	20. MOBILE NO.	09317425884
12. PHILHEALTH NO.	13-050207104-2	21. E-MAIL ADDRESS (if any)	darylomega12@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		NAME EXTENSION (JR., SR.)	N/A	
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	Omega			
FIRST NAME	Ramel	NAME EXTENSION (JR., SR.)		
MIDDLE NAME	Bandalan			
25. MOTHER'S MAIDEN NAME				
SURNAME	Hoyumpa			
FIRST NAME	Lerabell			
MIDDLE NAME	Decena			

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		PROFICIENCY LEVEL/ UNITS EARNED (if not)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	San. Isidro Elem. School	N/A				2013	1st Honorable
SECONDARY	Baybay National H.S	N/A				2019	With Honor
VOCATIONAL / TRADE COURSE	N/A	N/A					
COLLEGE	Visayas State University	BS in Agribusiness				2023	Cumlaude
GRADUATE STUDIES	N/A						

SIGNATURE		DATE	
		September 13, 2023	

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			
	Hinubigon Youth Association (HIYA)	08-03-2021	08-30-2023		Vice-President	
(Continue on separate sheet if necessary)						
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED						
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)						
30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	Internship-Relevo Farm (Broiler Poultry Farm)	03-28-23	04-28-23	300 hours	Caretaker	Relevo Farm Mahaplag Leyte
	Industry Immersion-Gabas Vegetable Growers Association (GAVEGA)	07-06-22	08-06-22	150 hours	Student Trainee/ Caretaker	Gabas Vegetable Growers Association
	Work Immersion-Baybay City Water District	12-05-18	12-20-18	80 hours	Student Trainee	Baybay City Water District
(Continue on separate sheet if necessary)						
VIII. OTHER INFORMATION						
31.	SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)			33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Communication Skills					
	Computer Literate					
	Leadership Skills					
	Adaptability					
	Dancing/Singing	SCUAA Representative				
	Basketball					
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	September 13, 2023	

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person who has immediate supervision over you in the 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?

b. Have you been criminally charged before any court?

☐ YES ☒ NO

If YES, give details:

☐ 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)?

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: _____

☐ 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

a. Are you a member of any indigenous group?

b. Are you a person with disability?

c. Are you a solo parent?

☐ YES ☒ NO

If YES, please specify: _____

☐ YES ☒ NO


If YES, please specify ID No: _____

☐ YES ☒ NO



If YES, please specify ID No: _____

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

NAME	ADDRESS	TEL. NO.
N/A	N/A	



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>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</p> <p>PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: _____</p> <p>ID/License/Passport No.: Drivers License H12-20-001884</p> <p>Date/Place of Issuance: March 12, 2020</p>	<p></p> <p>Signature (Sign inside the box)</p> <p>September 13, 2023</p> <p>Date Accomplished</p>	<p></p> <p>Right Thumbmark</p>
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SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath