Revised 2017 WARNING: Any concerned. READ THE ATT	C	Foi	m	No.
concerned.	Re	vised	1 20.	17
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PERSONAL DATA SHEET

misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person ACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM 1. CS ID No. Print legibly. Tick appropriate boxes (
) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use only) PACATE 2. SURNAME NAME EXTENSION (JR., SR) LOVELY JOY FIRST NAME MIDDLE NAME MANDRAS 3. DATE OF BIRTH 12/17/2002 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/yyyy) ✓ by birth by naturalization **BAYBAY CITY** 4. PLACE OF BIRTH If holder of dual citizenship, Pls. indicate country: please indicate the details. Male ✓ Female 5. SEX ✓ Single Married 17. RESIDENTIAL ADDRE CENTRO 6 CIVIL STATUS House/Block/Lot No. Street Widowed ☐ Separated MAYBOG Other/s: Subdivision/Village Barangay **BAYBAY CITY** LEYTE 1 63 7. HEIGHT (m) City/Municipality Province 8. WEIGHT (kg) 55 ZIP CODE 6521 18. PERMANENT ADDRES CENTRO 9. BLOOD TYPE N/A House/Block/Lot No. Street MAYBOG 10. GSIS ID NO. N/A Subdivision/Village Barangay **BAYBAY CITY** LEYTE 121352139441 11. PAG-IBIG ID NO. City/Municipality Province 13-250362511-7 12. PHILHEALTH NO. ZIP CODE 6521 06-4587474-3 13. SSS NO. 19. TELEPHONE NO. N/A 14. TIN NO. 661-453-339-0000 20. MOBILE NO. 0948-9422-920 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) lovelypacate07@gmail.com DATE OF BIRTH N/A 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) (mm/dd/vvvv) NAME EXTENSION (JR., SR) N/A FIRST NAME N/A N/A MIDDLE NAME N/A **OCCUPATION** N/A EMPLOYER/BUSINESS NA N/A **BUSINESS ADDRESS** N/A TELEPHONE NO. N/A 24. ATHER'S SURNAME PACATE MANUEL FIRST NAME JR. MIDDLE NAME **BATINO** 25. MOTHER'S MAIDEN NAME SURNAME **MANDRAS** FIRST NAME MA. JURGIN VELARDE MIDDLE NAME (Continue on separate sheet if necessary) HIGHEST SCHOLARS PERIOD OF YEAR BASIC EDUCATION/DEGREE/COURSE 26. NAME OF SCHOOL I FVFI / HIP/ LEVEL ATTENDANCE GRADUA (Write in full) (Write in full) UNITS ACADEMIC TED From To EARNED HONORS MAYBOG ELEMENTARY SCHOOL **ELEMENTARY ELEMENTARY** 2014 GRADUATED 4TH HONOR 2008 2014 WITH DAMULAAN NATIONAL HIGH SCHOOL SENIOR HIGH SCHOOL SECONDARY GRADUATED 2014 2020 2020 **HONORS** VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A TRADE COURSE **BACHELOR OF SECONDARY** COLLEGE VISAYAS STATE UNIVERSITY 2020 2024 GRADUATED 2024 **CUM LAUDE EDUCATION - SOCIAL STUDIES** N/A N/A N/A N/A **GRADUATE STUDIES** N/A N/A N/A (Continue on separate sheet if necessary) SIGNATURE DATE OCTOBER 7, 2024

CS FORM 212 (Revised 2017), Page 1 of 4

7. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		AWS/ CES/ CSEE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT				LICENSE (if ap	Date of Validity
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3.	if 125, give detail					
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OVI E	Park I Proper	From N/A	To N/A	N/A	N/A	Mann you over head separated from a refirement, do AVR of from the rolls, dis
N/A	rased If YES, give details	N/A	SHOWING THE	JO UNIA 1000	Y10IOS	out (abolling) in the public of private
ON [V]	Say L.J. Idea	ypar (cr	th midlive blo	r noisola Isad	I na lancilan n	a. Have you aren been e candidate in Barangay election)?
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ON N	☐ YES	COUNTRY	ent of anothe	manent reside	migrant or per	Have you acquired the status of an in
(country):	If YES, give details					
	ASI) encese9 hei	rda for Disa		ct (RA 8371)	Pursuant for (a) Indigenous People's
	:àr	tellowing its	e answer the	8972), piest	ot of 2000 (RJ group?	
ON [7]	WVES places aponity				- i don't	
	If YES, please specify					Are you a person with disability?
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III. OTHER INFORMATION						The strate state of the strate
31. SPECIAL SKILLS and HOBBIES	32. NO	N-ACADEMIC DIST (Wr	INCTIONS / RECO	OGNITION	Diber's License, etc.	33. MEMBERSHIP IN ASSOCIATION/ORGANIZA (Write in full)
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	ligad 6.0 object	1 mg/2) or 10 mg/2				cense/Passport No.: 6398 5031-2043-8103
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34. Are you related by consanguinity or affinity to the appointin chief of bureau or office or to the person who has immediate	g or recommending authority, or to the te supervision over you in the Office,				
Bureau or Department where you will be appointed,	WOLLAND DATES (mulddlysy) states				
a. within the third degree?	☐ YES ☑ NO				
b. within the fourth degree (for Local Government Unit - Ca	☐ YES ☑ NO				
		If YES, give details:			
35. a. Have you ever been found guilty of any administrative of	☐ YES ✓ NO				
		If YES, give details:			
b Have you have adminably charged before any court?	☐ YES ☑ NO				
b. Have you been criminally charged before any court?	If YES, give details:				
		Date Filed:			
	Continue of the street of the street	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?	DIGLUSIVE DATES OF	If YES, give details:			
YB CENDALY (Materiagener) CONDUCTELY SPONSOCIETY TO THE CONTROLL OF THE CONTRO	German (AAAAppaun)	(the of ethal)			
37. Have you ever been separated from the service in any of		☐ YES ☑ NO			
retirement, dropped from the rolls, dismissal, termination, out (abolition) in the public or private sector?	end of term, finished contract or phased	If YES, give details:			
38. a. Have you ever been a candidate in a national or local e Barangay election)?	lection held within the last year (except	☐ YES ☑ NO			
b. Have you resigned from the government service during	the three (3) month period before the last	If YES, give details:			
election to promote/actively campaign for a national or loc	If YES, give details:				
39. Have you acquired the status of an immigrant or permane	☐ YES ☑ NO				
		If YES, give details (country):			
10 To 11 A 1/DA 0074) (1) A	A O to for Disabled Domeson (DA				
 Pursuant to: (a) Indigenous People's Act (RA 8371); (b) N 7277); and (c) Solo Parents Welfare Act of 2000 (RA 897 					
a. Are you a member of any indigenous group?		☐ YES ☑ NO If YES, please specify:			
b. Are you a person with disability?		YES ✓ NO			
c. Are you a solo parent?		If YES, please specify ID No: YES NO			
7 No you a colo paronti		If YES, please specify ID No:			
41. REFERENCES (Person not related by consanguinity or affinity to applic	ant /appointee)				
NAME	ADDRESS	TEL. NO.			
JAY C. BANSALE	VISCA, BAYBAY CITY, LEYTE	9489762630			
REX M. AUTIDA	MAYBOG, BAYBAY CITY, LEYTE	9176321804			
SONIA A. BERTOS	MAYBOG, BAYBAY CITY, LEYTE	9176348703			
42. I declare under oath that I have personally accomplisis complete statement pursuant to the provisions of per Philippines. I authorize the agency head/authorized representation made in this do administrative/criminal case/s against me.	rtinent laws, rules and regulations of the esentative to verify/validate the contents sta	Republic of the leader ted herein.			
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	(that or estable)	SPECIAL SAFER			
Government Issued ID: PHIL. ID	AM OFF				
ID/License/Passport No.: 6398-6031-2043-8105	Signature (Sign inside the				
Date/Place of Issuance: 9/17/2021 / BAYBAY CITY	O(TOBER 7 2014) Date Accomplished	O(TDBER 7 2004) Date Accomplished Right Thumbmark			
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