Revised 2017	PERSONAL DATA SHEET										
WARNING: Any misrepreser	ntation made in							e/criminal case/s	against the p	erson	
concerned. READ THE ATTACHED GUIL Print legibly. Tick appropriate box	DE TO FILLING	OUT THE PED	SONAL DATAS	HEET (PDS) BEFORE ACCO	MPLISHING	THE PDS F				. For CSC use on	
I. PERSONAL INFORMAT		separate sneet ii	necessary. Indica								
2. SURNAME	BIBAT INAME EXTENSION (JR., SP)										
FIRST NAME	JAMES CHAR										
MIDDLE NAME	BUATIS										
3. DATE OF BIRTH	BOATTO	5/28/2001		16. CITIZENSHIP		 ✓ Fi	lipino [Dual Gitizenshi	p		
(mm/dd/yyyy)	BRGY, CONALUM, INOPACAN LEYTE			If holder of dual citiz	✓by bi			✓ by birth Pls. indicate	th by naturalization cate country:		
4. PLACE OF BIRTH	BRGY. C	CONALUM, INC	_	please indicate the							
5. SEX	✓ Male		Female	-		PUROK 1A	DUDOK 1A				
6 CIVIL STATUS	✓ Single			17. RESIDENTIAL ADDRESS	PUROK 1A House/Block/Lot No.			Street CONALUM			
	☐ Widow ☐ Other/s		Separated	a contract constant		Subdivision/Vil	lage		Barangay		
Control of the Contro	-	T WE'N I	Angel	restabling weren		INOPACAN	1 regarding		Province		
7. HEIGHT (m)	10.00	1.75		-		City/Municipa	iny	6522	NO. PERSON	1000	
8. WEIGHT (kg)	79	3000.00	OPACAN	ZIP CODE	1 310	PUROK 1A	a Habutaes	(9) (2)(3) 1	720.00		
9. BLOOD TYPE		AB+		18. PERMANENT ADDRESS		House/Block/Lo			Street		
		N/A				Subdivision/Vill.	ana		CONALUM Barangay		
10. GSIS ID NO.		IVA			-	INOPAC			LEYTE		
11. PAG-IBIG ID NO.		N/A			+	City/Municipal	ity		Province		
12. PHILHEALTH NO.		N/A		ZIP CODE		6522					
13. SSS NO.		N/A		19. TELEPHONE NO.				N/A			
14. TIN NO.	648196438			20. MOBILE NO.	-	09933241629					
		N/A		21. E-MAIL ADDRESS (if any)	-		bibatjame	schar@gmail.com	1		
15. AGENCY EMPLOYEE NO.		NA									
II. FAMILY BACKGROUN	D		N/A		23. NAME of	CHILDREN (WI	ite full name and	l list all)	DATE OF BIR	TH (mm/dd/yyyy)	
22. SPOUSE'S SURNAME	-	N/A	11074	NAME EXTENSION (JR., SR)	NA			N/A			
FIRST NAME		N/A	N/A				NEA			N/A	
MIDDLE NAME			N/A				NA		NIA		
OCCUPATION							N/A		N/A		
EMPLOYER/BUSINESS NAME			N/A				N/A		N/A		
BUSINESS ADDRESS			N/A			NA NA			N/A		
TELEPHONE NO.			N/A							INA	
4. FATHER'S SURNAME	h		BIBAT			No.					
FIRST NAME		JIMEFREDO NAME EXTENSION (JR., SR)							6/	19/1965	
MIDDLE NAME			VALENZONA		-						
5. MOTHER'S MAIDEN NAME		_	BUATIS						11/	25/1968	
SURNAME										100	
FIRST NAME			CHARINA				00-11	norsta nhost if nace	econd		
MIDDLE NAME			BAYHONAN			((continue on se	parate sheet if nece	oodi yi		
II. EDUCATIONAL BACKG	ROUND				1					SCHOLARSHIP	
26. LEVEL		NAME OF SCHOO (Write in full)	OL .	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC	
ELEMENTARY	INOPA	CAN PARISH ACA	DEMY INC.			6/1/2007	3/30/2014		2014	VALEDICTORI N	
SECONDARY	GRELINA OSMEÑA CHRISTIAN COLLEGE				6/1/2014	3/30/2020		2020	WITH HIGH HONORS		
VOCATIONAL / TRADE COURSE											
COLLEGE	UNIVERSITY	Y OF THE PHILLIPII	NES TACLOBAN			9/10/2020	5/24/2024		2024		
GRADUATE STUDIES					-						
SIGNATURE	1	mos dienr	2 · atao	ontinue on separate sheet if nece	ssary)	DA	ATE	04-30-	гогу	roe I	

CAF	CIVIL SERVICE ELIGIBILITY CAREER SERVICE RA 1080 (BOARD/ BAR) UNDER RATIN			DATE OF EXAMINATION /			LICENSE (if applicable)		
	SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			ATING EXAMINATION / PLACE OF EXAMINATION / CONFERMENT			RMENT	NUMBER	Date of Validity
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WORK	EXPERIENCE		(00)	iunue on separate sneet ii	necessary				
WORK	EXPERIENCE	t Start from your recent	work) Description	n of duties should be	indicated in the attach	ed Work Ex	erience sheet		
	USIVE DATES	a Standitonia your recent	MOINT PROTEINED				SALARY/ JUBY PAT		GOV
	nm/dd/yyyy)	POSITION TIT		DEPARTMENT / AGEN	MONTHLY SALARY	GRADE (if applicable)& STEP (Format '00-0")/	STATUS OF APPOINTMENT	SERVIC	
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9. NAME & ADDRESS OF		INCLUSIV	E DATES	To be to be	United States	THE UNITED HER PROPERTY OF THE PROPERTY OF	
9. (Write in		(mm/dd/yyyy) From To		NUMBER OF HOUR	s	POSITION / NATURE OF WORK	
UP ASSOCIATION OF CANA-CEBUAN	9/10/2020 18/22/2023	5/20/2024 5/20/2024	to object	TREASURER			
JJC TACLOBAN SI				RECOR	OS AND RECOGNITION COMMISSIONER		
JJC TACLOBAN SIN	2/1/2023	6/30/2023	30 Table 400	ENVIRON	NMENT AND COMMUNITY COMMISSIONER		
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LEARNING AND DEVELOPMENT (L&	(CO	PROGRAMS A	TTENDED				
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		ATTENDANCE (mm/dd/yyyy) From To		NUMBER OF HOURS	Type of LD (Managerlal/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
JPES ECONOMIC REGIONA	CONFERENCE	3/26/2024	3/26/2024	8.0	TECHICAL	JUNIOR PHILIPPINE ECONOMIC SOCIETY	
EASTERN VISAYAS REGIONAL EC	DNOMIC CONFERENCE	4/25/2023	4/25/2023	8.0	SECRETARIAL	UP TACLOBAN ECONOMIC SOCIETY	
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OTHER INFORMATION		nunce on separate s	neet ii necessaa y				
SPECIAL SKILLS and HOBBIES	32. NO	N-ACADEMIC DISTIN (Write	CTIONS / RECOGI in full)	NITION	THE ASSESSMENT	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATIO (Write in full)	
EXPERTISE IN MS OFFICE	EXPERTISE IN MS OFFICE					UP ECONOMIC SOCIETY	
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		JJC TACLOBAN SINIRANGAN UP ASSOCIATION OF CANA CEBUANO SPEAKING ORGANIZATION					
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SIGNATURE	Jam Short Z	at stantal town	C 800 - 100	1) 1.	DATE	04-30-2024	

34. Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Care).	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:					
35. a. Have you ever been found guilty of any administrative off	☐ 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 a by any court or tribunal?	ny law, decree, ordinance or regulation	YES NO If YES, give details:				
37. Have you ever been separated from the service in any of th retirement, dropped from the rolls, dismissal, termination, er out (abolition) in the public or private sector?	e following modes: resignation, nd of term, finished contract or phased	☐ YES ☑ NO If YES, give details:				
38. a. Have you ever been a candidate in a national or local ele	ction held within the last year (except	☐ YES ☑ NO				
Barangay election)?		If YES, give details:				
 b. Have you resigned from the government service during the 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 permanen	☐ YES ☑ NO If YES, give details (country):					
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	ona Carta for Disabled Persons (RA					
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)	, please answer the following items:					
Are you a member of any indigenous group?		☐ YES ☑ NO If YES, please specify:				
the dispersion of		☐ YES ☑ NO				
b. Are you a person with disability?		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	t /appointee)					
NAME	ADDRESS	TEL. NO.				
DR. ELWIN JAY YU	BAYBAY CITY	9298019567				
AXL BULAWAN	BAYBAY CITY	9917886107				
42. I declare under oath that I have personally accomplished complete statement pursuant to the provisions of perting Philippines. I authorize the agency head/authorized representation made in this document and administrative/criminal case/s against me. Application of the provision of perting the provision of perting the provision of perting the provision of	ent laws, rules and regulations of the entative to verify/validate the contents state	Republic of the address. I	PHOTO			
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance						
Government Issued ID: LICENSE ID	100 100 1		3913			
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Date/Place of Issuance: LTO BAYBAY	Date Accomplished	Rig	ht Thumbmark			
SUBSCRIBED AND SWORN to before me this	ATTY, JUNATHAN T. DAG	RNEY	indicated above.			
3.4	Person Administering Oat	h	Shade and			
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WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

Duration: January 1, 2024- March 30, 2024

- · Position: Research Enumerator
- · Name of Office/Unit: Inopacan Leyte
- · Immediate Supervisor: Verheart B. Nirza
- · Name of Agency/Organization and Location: for her masters in Southern Leyte State University
 - List of Accomplishments and Contributions (if any)
 - Administer Survey questionnaire
 - Data Compilation and Cleaning
 - Doing descriptive analysis
 - Report the summarized data

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- Summary of Actual Duties
 - Responsible for collecting accurate data based on her objectives which focused primarily on Revenue Management in the municipality of Inopacan, conducting interviews and surveys, maintain the confidentiality of the respondents aas as well as reporting the findings to the researcher and supervisor.

(Signature over Printed Name of Employee/Applicant)

Date: 04/27/2024