

## 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	BIBAT	NAME EXTENSION (JR., SR)	
FIRST NAME	JAMES CHAR		
MIDDLE NAME	BUATIS		
3. DATE OF BIRTH (mm/dd/yyyy)	5/28/2001	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pis. indicate country:
4. PLACE OF BIRTH	BRGY. CONALUM, INOPACAN 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 1A House/Block/Lot No. Street Subdivision/Village Barangay INOPACAN LEYTE City/Municipality Province ZIP CODE 6522
7. HEIGHT (m)	1.75	18. PERMANENT ADDRESS	PUROK 1A House/Block/Lot No. Street Subdivision/Village Barangay INOPACAN LEYTE City/Municipality Province ZIP CODE 6522
8. WEIGHT (kg)	79	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	AB+	20. MOBILE NO.	09933241629
10. GSIS ID NO.	N/A	21. E-MAIL ADDRESS (if any)	bibatjameschar@gmail.com
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	N/A		
13. SSS NO.	N/A		
14. TIN NO.	648196438		
15. AGENCY EMPLOYEE NO.	N/A		

### 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		N/A
MIDDLE NAME	N/A		N/A
OCCUPATION	N/A		N/A
EMPLOYER/BUSINESS NAME	N/A		N/A
BUSINESS ADDRESS	N/A		N/A
TELEPHONE NO.	N/A		N/A
24. FATHER'S SURNAME	BIBAT		
FIRST NAME	JIMEFREDO		6/19/1965
MIDDLE NAME	VALENZONA		
25. MOTHER'S MAIDEN NAME			
SURNAME	BUATIS		11/25/1968
FIRST NAME	CHARINA		
MIDDLE NAME	BAYHONAN		

(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	INOPACAN PARISH ACADEMY INC.		6/1/2007	3/30/2014		2014	VALEDICTORIAN
SECONDARY	GRELINA OSMENA CHRISTIAN COLLEGE		6/1/2014	3/30/2020		2020	WITH HIGH HONORS
VOCATIONAL / TRADE COURSE							
COLLEGE	UNIVERSITY OF THE PHILLIPINES TACLOBAN COLLEGE		9/10/2020	5/24/2024		2024	
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	04-30-2024
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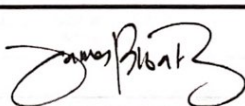

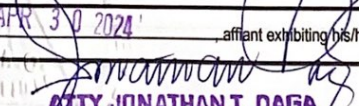










<p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed,</p> <p>a. within the third degree?</p> <p>b. within 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> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>DR. ELWIN JAY YU</td> <td>BAYBAY CITY</td> <td>9298019567</td> </tr> <tr> <td>AXL BULAWAN</td> <td>BAYBAY CITY</td> <td>9917886107</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	DR. ELWIN JAY YU	BAYBAY CITY	9298019567	AXL BULAWAN	BAYBAY CITY	9917886107			
NAME	ADDRESS	TEL. NO.											
DR. ELWIN JAY YU	BAYBAY CITY	9298019567											
AXL BULAWAN	BAYBAY CITY	9917886107											
<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>													
<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: LICENSE ID</p> <p>ID/License/Passport No.: H12-22-301433</p> <p>Date/Place of Issuance: LTO BAYBAY</p>	<p></p> <p>Signature (Sign inside the box)</p> <p>04-30-2024</p> <p>Date Accomplished</p>												
<p>SUBSCRIBED AND SWORN to before me this <u>APR 30 2024</u>, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="text-align: center;">  <p>Right Thumbmark</p> </div>													
<p style="text-align: center;">   <b>ATTY. JONATHAN T. DAGA</b>  <b>ASST. REGIONAL PUBLIC ATTORNEY</b>  <b>Pursuant to R.A. No. 9406</b>  <b>Person Administering Oath</b> </p>													



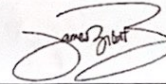
### WORK EXPERIENCE SHEET

**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
  -
- 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 as well as reporting the findings to the researcher and supervisor.



(Signature over Printed Name  
of Employee/Applicant)

Date: 04/27/2024