

# 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** A 1. CS ID No. (Do not fill up. For )

## I. PERSONAL INFORMATION


2. SURNAME	TABING		
FIRST NAME	HOPE MADELANE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	NUNEZ		
3. DATE OF BIRTH (mm/dd/yyyy)	02/27/1995	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	WLPH, BAYBAY, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" 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	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
7. HEIGHT (m)	1.524	ZIP CODE	
8. WEIGHT (kg)	44		
9. BLOOD TYPE		18. PERMANENT ADDRESS	17-30 DE DICIEMBRE House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
10. GSIS ID NO.		ZIP CODE	
11. PAG-IBIG ID NO.	1211-6355-1354		
12. PHILHEALTH NO.	13-250344725-1		
13. SSS NO.	06-37023094	19. TELEPHONE NO.	
14. TIN NO.	470-569-478-000	20. MOBILE NO.	0966-350-9109
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	

## 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		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	TABING			
FIRST NAME	FIDEL	SR		
MIDDLE NAME	IBANEZ			
25. MOTHER'S MAIDEN NAME	NUNEZ			
SURNAME	TABING			
FIRST NAME	JEROMIA GEMMA			
MIDDLE NAME	BORBAJO		(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
			From	To		

ELEMENTARY	GRACE CHRISTIAN SCHOOL		2001	2007		2007
SECONDARY	VISAYAS STATE UNIVERSITY- LABORATORY HIGH SCHOOL		2007	2011		2011
VOCATIONAL / TRADE COURSE						
COLLEGE	UNIVERSITY OF SAN CARLOS	BS PSYCHOLOGY	2011	2015		2015
GRADUATE STUDIES						
<i>(Continue on separate sheet if necessary)</i>						
<b>SIGNATURE</b>			<b>DATE</b>	03/14/2022		CS FORM 212 (Revised 2017)

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CSC use only)

ation



IF BIRTH  
id/yyyy)

SCHOLARSHIP  
/ ACADEMIC  
HONORS  
RECEIVED




[illegible]

**(Continue on separate sheet if necessary)**


## VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

(Continue on separate sheet if necessary)

## VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
					<b>JPMAP</b>

		GRACE DRIVE MINISTRIES	
<i>(Continue on separate sheet if necessary)</i>			
<b>SIGNATURE</b>		<b>DATE</b>	<b>03/14/2022</b>
		CS FORM 212 (Revised 2017), Page	







<p>34. Are you related by consanguinity or affinity to the appointing or recommending chief of bureau or office or to the person who has immediate supervision over you in 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 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 checked="" type="checkbox"/> YES      <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: center;"><u>RESIGNATION</u></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><b>MAUREEN M. LICAYAO</b></td> <td><b>CEBU CITY</b></td> <td><b>09171395154</b></td> </tr> <tr> <td><b>FEY JOHLEN LESLIE</b></td> <td><b>MAKATI CITY</b></td> <td><b>09457688450</b></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	<b>MAUREEN M. LICAYAO</b>	<b>CEBU CITY</b>	<b>09171395154</b>	<b>FEY JOHLEN LESLIE</b>	<b>MAKATI CITY</b>	<b>09457688450</b>				<div style="border: 1px solid black; width: 150px; height: 150px; margin: 0 auto; position: relative;"> </div> <p>PHOTO</p>
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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> <td style="padding: 2px;">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> <td style="padding: 2px;">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td style="padding: 2px;">Government Issued ID:</td> <td style="padding: 2px;"> </td> </tr> <tr> <td style="padding: 2px;">ID/License/Passport No.:</td> <td style="padding: 2px;"> </td> </tr> <tr> <td style="padding: 2px;">Date/Place of Issuance:</td> <td style="padding: 2px;"> </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:		ID/License/Passport No.:		Date/Place of Issuance:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 100px; text-align: center; vertical-align: middle;"> </td> </tr> <tr> <td style="text-align: center;">Signature (Sign inside the box)</td> </tr> <tr> <td style="text-align: center;">07/19/2022</td> </tr> </table>			Signature (Sign inside the box)	07/19/2022	
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07/19/2022														

Date/Place of Issuance:

Date Accomplished

Right Thumbmark

DESCRIBED AND SWORN to before me this \_\_\_\_\_, affiant exhibiting his/her validly issued government ID as indicated above

Person Administering Oath