

## 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	OPONDA		
FIRST NAME	FRANCIS MARC	N/A	
MIDDLE NAME	ROA		
3. DATE OF BIRTH (mm/dd/yyyy)	01/12/1992	16. CITIZENSHIP	<input type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input checked="" type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	ALBUERA, 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	440 P. NARCISO House/Block/Lot No. Street N/A DAMULA-AN Subdivision/Village Barangay ALBUERA LEYTE City/Municipality Province
7. HEIGHT (m)	1.65	ZIP CODE	6542
8. WEIGHT (kg)	57	18. PERMANENT ADDRESS	440 P. NARCISO House/Block/Lot No. Street N/A DAMULA-AN Subdivision/Village Barangay ALBUERA LEYTE City/Municipality Province
9. BLOOD TYPE	O	ZIP CODE	6542
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	N/A	20. MOBILE NO.	09928790672
12. PHILHEALTH NO.	N/A	21. E-MAIL ADDRESS (if any)	opondamarc@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	N/A	N/A	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	OPONDA			
FIRST NAME	FRANCISCO	JR.		
MIDDLE NAME	APAD			
25. MOTHER'S MAIDEN NAME	JOSEPHINE B. ROA			
SURNAME	ROA			
FIRST NAME	JOSEPHINE			
MIDDLE NAME	BARCENAS		(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	DAMULA-AN CENTRAL SCHOOL, ALBUERA CENTRAL SCHOOL	PRIMARY EDUCATION	1998	2004	N/A	2004	FIRST HONORABLE MENTION
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	HIGH SCHOOL	2004	2008	N/A	2008	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	PALOMPON INSTITUTE OF TECHNOLOGY, EASTERN VISAYAS STATE UNIVERSITY - ORMOC CITY CAMPUS	BACHELOR OF SCIENCE IN MARINE TRANSPORTATION - NAUTICAL SCIENCE DIPLOMA IN TEACHING SECONDARY	2008 2022	2011 2024	N/A 33 UNITS	2013 N/A	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)	
SIGNATURE	DATE December 24, 2023

27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	CAREER SERVICE PROFESSIONAL	80.9	06/28/2018	CSCRO8, PALO, LEYTE	0801-18-868004	07/24/2018
	LICENSED PROFESSIONAL TEACHER	88.0	09/24/2023	TACLOBAN CITY, LEYTE	2142012	02/07/2024

**V. WORK EXPERIENCE**  
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

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[illegible]

<b>SIGNATURE</b>		<b>DATE</b>	December 24, 2023
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[illegible]

**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)

[illegible]

## VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
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I USED TO PLAY DRUMS AND GUITAR	N/A	N/A
SURF THE INTERNET ABOUT TOPICS I'M INTERESTED IN LIKE GEOPOLITICS AND SPACE EXPLORATION		

<b>SIGNATURE</b>		<b>DATE</b>	December 24, 2023
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December 24, 2023

<p>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 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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>HEALTH ISSUES</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</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>CAPT. JOSEPH CYRIL C. TOLENTINO PHILIPPINE MARINES</td> <td>DAMULA-AN, ALBUERA, LEYTE</td> <td>09178415330</td> </tr> <tr> <td>PETER JUNE D. DADIOS, Ph. D. SLSU-BONTOC CAMPUS</td> <td>TINAG-AN, ALBUERA, LEYTE</td> <td>09353465296</td> </tr> <tr> <td>ALEJANDRO S. ALMENDRAS, EdD CHIEF EDUCATION SUPERVISOR, DEPED ORMOC</td> <td>TAMBULID, ORMOC CITY, LEYTE</td> <td>09190066056</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	CAPT. JOSEPH CYRIL C. TOLENTINO PHILIPPINE MARINES	DAMULA-AN, ALBUERA, LEYTE	09178415330	PETER JUNE D. DADIOS, Ph. D. SLSU-BONTOC CAMPUS	TINAG-AN, ALBUERA, LEYTE	09353465296	ALEJANDRO S. ALMENDRAS, EdD CHIEF EDUCATION SUPERVISOR, DEPED ORMOC	TAMBULID, ORMOC CITY, LEYTE	09190066056
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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>													
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<p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; width: 250px; height: 60px; margin: 10px auto; text-align: center; padding-top: 5px;">       Person Administering Oath     </div>													