

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.

CS ID No.

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	HERBOLINGO		
FIRST NAME	DEBIE JEAN		NAME EXTENSION (JR., SR.) N/A
MIDDLE NAME	MAGNO		
3. DATE OF BIRTH (mm/dd/yyyy)	11/13/1994	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	BAYBAY CITY 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	N/A House/Block/Lot No. Street N/A SAN AGUSTIN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.499METERS	ZIP CODE	6521
8. WEIGHT (kg)	50 KILOGRAMS	18. PERMANENT ADDRESS	N/A House/Block/Lot No. Street N/A SAN AGUSTIN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
9. BLOOD TYPE	O	ZIP CODE	6521
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	1211-5941-5763	20. MOBILE NO.	09456799723
12. PHILHEALTH NO.	12-051466164-8	21. E-MAIL ADDRESS (if any)	babydebs08@gmail.com
13. SSS NO.	06-3697370-5		
14. TIN NO.	328-592-941-000		
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	NAME EXTENSION (JR., SR.) N/A	PRINCESS DEBRIELLE HERBOLINGO	7/2/2019
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	HERBOLINGO			
FIRST NAME	DOMINIC	NAME EXTENSION (JR., SR.) SR		
MIDDLE NAME	DANCEL			
25. MOTHER'S MAIDEN NAME				
SURNAME	MAGNO			
FIRST NAME	BERNARDITA			
MIDDLE NAME	VILLACORTA			

(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	SAN AGUSTIN ELEMENTARY SCHOOL	PRIMARY EDUCATION	6/1/2001	3/1/2007	GRADUATED	2007	N/A
SECONDARY	BUNGA NATIONAL HIGH SCHOOL	HIGH SCHOOL	6/5/2007	3/13/2011	GRADUATED	2011	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF ELEMENTARY EDUCATION	6/3/2011	4/22/2015	GRADUATED	2015	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	March 8, 2023
-----------	--	------	---------------

[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	MARCH 08, 2023
[Signature]			

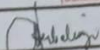
CS FORM 312 (Revised 2017), Page 2

[illegible]

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

[illegible]

VIII. OTHER INFORMATION

VIII. OTHER INFORMATION		IX. SIGNATURES	
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
BADMINTON	N/A	N/A	
(Continue on separate sheet if necessary)			
SIGNATURE		DATE	MARCH 08, 2023

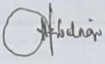
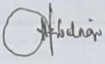
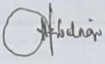






CLS FORM 212 (Revised 2017), Page 3

(Continue on separate sheet if necessary)

SIGNATURE

DATE _____

MARCH 08, 2023

<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 style="text-align: center;">N/A</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 style="text-align: center;">N/A</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: center;">Date Filed: N/A</p> <p style="text-align: center;">Status of Case/s: N/A</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 style="text-align: center;">N/A</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 style="text-align: center;">N/A</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 style="text-align: center;">N/A</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: center;">N/A</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 style="text-align: center;">N/A</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 style="text-align: center;">N/A</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p style="text-align: center;">N/A</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p style="text-align: center;">N/A</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>MILA P. BALAN</td> <td>BAYBAY CITY, LEYTE</td> <td>9988466864</td> </tr> <tr> <td>STELA MAE CALASAGSAG</td> <td>ILO-ILO CITY</td> <td>9972592061</td> </tr> <tr> <td>MA. ROSARIO V. MAGNO</td> <td>SAN ISIDRO, LEYTE</td> <td>9284025092</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	MILA P. BALAN	BAYBAY CITY, LEYTE	9988466864	STELA MAE CALASAGSAG	ILO-ILO CITY	9972592061	MA. ROSARIO V. MAGNO	SAN ISIDRO, LEYTE	9284025092
NAME	ADDRESS	TEL. NO.											
MILA P. BALAN	BAYBAY CITY, LEYTE	9988466864											
STELA MAE CALASAGSAG	ILO-ILO CITY	9972592061											
MA. ROSARIO V. MAGNO	SAN ISIDRO, LEYTE	9284025092											
<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: UNIFIED MULTI-PURPOSE ID</p> <p>ID/License/Passport No.: 0111-7690913-1</p> <p>Date/Place of Issuance: 06/06/2015 ORMOC CITY</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; height: 50px;">  </td> </tr> <tr> <td style="text-align: center;"> <p>Signature (Sign inside the box)</p> <p>03/08/2023</p> <p>Date Accomplished</p> </td> </tr> </table>		<p>Signature (Sign inside the box)</p> <p>03/08/2023</p> <p>Date Accomplished</p>										
													
<p>Signature (Sign inside the box)</p> <p>03/08/2023</p> <p>Date Accomplished</p>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; text-align: center;">  </td> <td style="width: 40%; text-align: center;">  <p>Right Thumbmark</p> </td> </tr> </table>			 <p>Right Thumbmark</p>										
	 <p>Right Thumbmark</p>												
<p>SUBSCRIBED AND SWORN to before me this MAR 08 2023, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <p>DOC. NO. 1439</p> <p>PAGE NO. 32</p> <p>BOOK NO. 1</p> <p>SERIES OF 2027</p> </div> <div style="width: 60%; text-align: center;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;"> <p>ATTY. DECROSE P. PAPA</p> <p>Public Attorney II</p> <p>(Purs Person Administering Oath)</p> </td> </tr> </table> </div> </div>		<p>ATTY. DECROSE P. PAPA</p> <p>Public Attorney II</p> <p>(Purs Person Administering Oath)</p>											
<p>ATTY. DECROSE P. PAPA</p> <p>Public Attorney II</p> <p>(Purs Person Administering Oath)</p>													