

PERSONAL DATA SHEET

WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal cases against the person concerned.

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

Print legibly. Use appropriate boxes ☐ and use separate sheet if necessary. Indicate N/A if not applicable. **DO NOT ABBREVIATE.**

1/23/2020

(Print Name For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	DALIN-AS		
FIRST NAME	DIANNE	Last Initials (Jr., III)	
MIDDLE NAME	MAGLINTE		
3. DATE OF BIRTH (month/day/year)	08/17/1991	6. CITIZENSHIP	☒ Filipino ☐ Dual Citizenship ☒ By birth ☐ By naturalization Pls. indicate country:
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	7. RESIDENTIAL ADDRESS	Philippines (place indicate the details)
5. SEX	☐ Male ☒ Female	8. PERMANENT ADDRESS	Philippines (place indicate the details)
9. MARITAL STATUS	☒ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other(s)	9. TELEPHONE NO.	N/A
10. HEIGHT (cm)	57	10. MOBILE NO.	09088146
11. WEIGHT (kg)	51 kg	11. E-MAIL ADDRESS (if any)	dalinadianne@jurnal.com
12. BLOOD TYPE			
13. SSN/ICNO	2003700005		
14. PHOENIX ID NO.	12032301568		
15. HEALTH ID NO.	11-850115076-0		
16. SSN NO.	6641813458		
17. TIN NO.	729-900-04-000		
18. AGENCY EMPLOYEE NO.			

II. FAMILY BACKGROUND

23. SPOUSE'S SURNAME	N/A	24. NAME of CHILDREN (Write full name and birth date)	DATE OF BIRTH (month/day/year)
FIRST NAME	N/A		02/02/2011
MIDDLE NAME	N/A		
OCCUPATION	N/A		
EMPLOYER/BUSINESS NAME	N/A		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	N/A		
25. FATHER'S SURNAME	DALIN-AS		
FIRST NAME	ALEJANDRO		
MIDDLE NAME	SAMANTE		
26. MATHER'S MAREN NAME			
SURNAME	MAGLINTE		
FIRST NAME	ASUNCION		
MIDDLE NAME	CADREPOY		

III. EDUCATIONAL BACKGROUND

28. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL (with honors) (if not graduated)	YEARS GRADUATED	SCHOLARSHIP AWARDS (HONORS) RECEIVED
			From	To			
ELEMENTARY	KLING ELEMENTARY SCHOOL	HIGHER EDUCATION	1999	2004	GRADUATED	2004	RALESTORIAN
SECONDARY	BAYBAY CITY'S HIGH SCHOOL	HIGH SCHOOL	2004	2008	GRADUATED	2008	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	WISCONSIN STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRIBUSINESS	2014	2018	GRADUATED	2018	CUM LAUDE
GRADUATE STUDIES	WISCONSIN STATE UNIVERSITY	MASTER OF MANAGEMENT	2019		On-going	On-going	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	JULY 02, 2020
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[illegible]

IV. WORK EXPERIENCE

Include college employment. Start from your recent work. Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

SIGNATURE		DATE	
		JUL 17 2022	

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, a. within the third degree? b. within the fourth degree (for Local Government Unit – Career Employees)?	☐ YES ☒ NO ☐ YES ☒ NO If YES, give details: _____												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	☐ YES ☒ NO If YES, give details: _____ ☐ YES ☒ NO If YES, give details: _____ Date Filed: _____ Status of Case/s: _____												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	☐ YES ☒ NO If YES, give details: _____												
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?	☐ YES ☒ NO If YES, give details: _____												
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? 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?	☐ YES ☒ NO If YES, give details: _____ ☐ YES ☒ NO If YES, give details: _____												
39. Have you acquired the status of an immigrant or permanent resident of another country?	☐ YES ☒ NO If YES, give details (country): _____												
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 8032), please answer the following items:													
a. Are you a member of any indigenous group?	☐ YES ☒ NO If YES, please specify: _____												
b. Are you a person with disability?	☐ YES ☒ NO 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/appointee) <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>DR. ANTONIO P. ABAMO</td> <td>WSCA BAYSAY CITY, LEYTE</td> <td>9389635693</td> </tr> <tr> <td>DR. ANALITA A. SALABAO</td> <td>WSCA BAYSAY CITY, LEYTE</td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	DR. ANTONIO P. ABAMO	WSCA BAYSAY CITY, LEYTE	9389635693	DR. ANALITA A. SALABAO	WSCA BAYSAY CITY, LEYTE				
NAME	ADDRESS	TEL. NO.											
DR. ANTONIO P. ABAMO	WSCA BAYSAY CITY, LEYTE	9389635693											
DR. ANALITA A. SALABAO	WSCA BAYSAY CITY, LEYTE												
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.													
Government Issued ID (e-Passport, CGS, SOS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: VOTER'S ID ID Number/Passport No.: 2706-0198A-HY79D8020000 Date/Place of Issuance: BAYSAY CITY, LEYTE	 Signature (Sign inside the box) JULY 02, 2023 Date Accomplished	 PHOTO Signature of Affiant GUARDIAN DEL GALAPAGOS Name											
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above. Person Administering Oath													