

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.)

I. PERSONAL INFORMATION

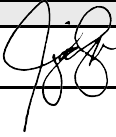
2. SURNAME	Villaber		
FIRST NAME	Rachel Jane	NAME EXTENSION (JR., SR)	
MIDDLE NAME	Son		
3. DATE OF BIRTH (mm/dd/yyyy)	2/2/1994	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization 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	293 - A Ramon Magsaysay Avenue House/Block/Lot No. Street Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
7. HEIGHT (m)	1.63	ZIP CODE	6521
8. WEIGHT (kg)	69		
9. BLOOD TYPE	B	18. PERMANENT ADDRESS	293 - A Ramon Magsaysay Avenue House/Block/Lot No. Street Subdivision/Village Barangay Baybay City City/Municipality Province
10. GSIS ID NO.		ZIP CODE	6521
11. PAG-IBIG ID NO.	121126782470		
12. PHILHEALTH NO.	030511941551		
13. SSS NO.	3447218083	19. TELEPHONE NO.	
14. TIN NO.	33689141000000	20. MOBILE NO.	09223702516
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	rachdark0932@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	Villaber			
FIRST NAME	Pablo	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Dupal			
25. MOTHER'S MAIDEN NAME				
SURNAME	Son			
FIRST NAME	Ma. Melba			
MIDDLE NAME	Luta		(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	Franciscan College of Immaculate Conception		6/5/2000	3/31/2006		2006
SECONDARY	Visayas State University Laboratory High School		6/5/2006	3/26/2010		2010

VOCATIONAL / TRADE COURSE						
COLLEGE	Visayas State University	BS in Biotechnology	6/7/2010	7/14/2019		2019
GRADUATE STUDIES						
(Continue on separate sheet if necessary)						
SIGNATURE			DATE		March 24, 2021	

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For CSC use only)

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H (mm/dd/yyyy)

SCHOLARSHIP/
ACADEMIC
HONORS
RECEIVED

IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	03/24/2021
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[illegible]

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S


[illegible]

(Continue on separate sheet if necessary)

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]

(Continue on separate sheet if necessary)		
VIII. OTHER INFORMATION		
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMORABLE
(Continue on separate sheet if necessary)		
SIGNATURE		DATE

[illegible]

<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 style="margin-left: 20px;">a. within the third degree?</p> <p style="margin-left: 20px;">b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<div style="text-align: right;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> </div> <div style="text-align: right;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> </div> <p>If YES, give details:</p> <hr style="width: 100%;"/>
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p style="margin-left: 20px;">b. Have you been criminally charged before any court?</p>	<div style="text-align: right;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> </div> <p>If YES, give details:</p> <hr style="width: 100%;"/> <div style="text-align: right;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> </div> <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>	<div style="text-align: right;"> <input type="checkbox"/> YES <input type="checkbox"/> </div> <p>If YES, give details:</p> <hr style="width: 100%;"/>
<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>	<div style="text-align: right;"> <input type="checkbox"/> YES <input type="checkbox"/> </div> <p>If YES, give details:</p> <hr style="width: 100%;"/>
<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 style="margin-left: 20px;">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>	<div style="text-align: right;"> <input type="checkbox"/> YES If YES, give details: </div> <div style="text-align: right;"> <input type="checkbox"/> YES If YES, give details: </div>
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<div style="text-align: right;"> <input type="checkbox"/> YES If YES, give details (cc </div> <hr style="width: 100%;"/>
<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>	<div style="text-align: right;"> <input type="checkbox"/> YES If YES, please specify: </div> <div style="text-align: right;"> <input type="checkbox"/> YES If YES, please specify ID </div> <div style="text-align: right;"> <input type="checkbox"/> YES If YES, please specify ID </div>
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p>	
NAME	ADDRESS
Caressa Marielle Poliquit	Baybay City, Leyte
Luis Eduardo Cudala	Cainta, Rizal
<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</p>	

against me.

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:



Signature (Sign inside the box)

03/23/2021

Date Accomplished

SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued governr

Person Administering Oath

NO
NO

NO

☒ NO

☒ NO

☒ NO

☒ NO

☒ NO

☒ NO
country):

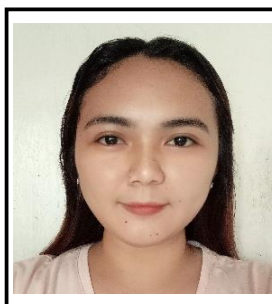
☒ NO

☒ NO

No:

☒ NO

No:



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ment ID as indicated above.