

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)

2. SURNAME	DAPROSA			
FIRST NAME	RONIE	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	DELANTAR			
3. DATE OF BIRTH (mm/dd/yyyy)	9/19/1980	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country: Philippines	
4. PLACE OF BIRTH	POBLACION, LEYTE, 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 type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	NATIONAL HIGHWAY	
7. HEIGHT (m)	1.70	ZIP CODE	House/Block/Lot No. Street SITIO BAKINGAN SALOG Subdivision/Village Barangay LEYTE LEYTE City/Municipality Province	
8. WEIGHT (kg)	68		6533	
9. BLOOD TYPE	"O"		18. PERMANENT ADDRESS	101 PAZ House/Block/Lot No. Street Subdivision/Village POBLACION LEYTE LEYTE City/Municipality Province
10. GSIS ID NO.	2004111396		ZIP CODE	6533
11. PAG-IBIG ID NO.	1210-0979-3801			
12. PHILHEALTH NO.	13-200694384-9			
13. SSS NO.	N/A	19. TELEPHONE NO.	NONE	
14. TIN NO.	407-702-764	20. MOBILE NO.	09776856576	
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	roniedaprosa80@gmail.com	

II. FAMILY BACKGROUND


22. SPOUSE'S SURNAME	PARALES		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	MARIFE	NAME EXTENSION (JR., SR) N/A	ROMAR JOHN P. DAPROSA	3/21/2007
MIDDLE NAME	ARAZA		RHONA FE P. DAPROSA	10/24/2008
OCCUPATION	NONE		RODGEN RICK P. DAPROSA	3/10/2013
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	DAPROSA			
FIRST NAME	GREGORIO	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	REUBAL			
25. MOTHER'S MAIDEN NAME				
SURNAME	DELANTAR			
FIRST NAME	LILIA			
MIDDLE NAME	LLABORE			

(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	LEYTE CENTRAL SCHOOL	PRIMARY EDUCATION	1987	1993	GRADUATED	1993	NONE
SECONDARY	LEYTE AGRO-INDUSTRIAL SCHOOL	SECONDARY SCHOOL	1993	1997	GRADUATED	1997	NONE
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	NAVAL INSTITUTE OF TECHNOLOGY/ BILIRAN PROVINCE STATE UNIVERSITY	BACHELOR OF SCIENCE IN INDUSTRIAL TECHNOLOGY (MAJOR IN DRAFTING)	2004	2007	GRADUATED	2007	NONE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	12/06/2024
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[illegible]

(Continue on separate sheet if necessary)

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

[illegible]

(Continue on separate sheet if necessary)

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	GRAPHIC DESIGNING USING AUTOCAD & SKETCHUP APPLICATION		N/A		N/A
	MANUAL & GRAPHIC DRAWING				
	PHOTOSHOP EDITING				
	LAPTOP, PC & PRINTER TECHNICIAN				

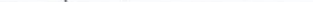
(Continue on separate sheet if necessary)

SIGNATURE		DATE	12/06/2024
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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
	DRAFTSMAN ELIGIBILITY	N/A	8/3/2012	TACLOBAN, CITY	340208120002	3/13/2012
	CAREER SERVICE PROFESSIONAL ELIGIBILITY	80.8	8/11/2024	NAVAL, BILIRAN	RO8-20241122-001	10/15/2024

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

[illegible]

SIGNATURE		DATE	12/06/2024
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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:

RESIGNATION

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 8972), please answer the following items:

a. Are you a member of any indigenous group?

b. Are you a person with disability?

c. Are you a solo parent?

☐ YES

☒ NO

If YES, please specify:

☐ YES

☒ NO

If YES, please specify ID No:

☐ YES


☒ NO

If YES, please specify ID No:


41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
ENGR. MAY WEN BETH P. SABITE	LEYTE, LEYTE	
IDALYNE L. ARANTE	LEYTE, LEYTE	
ENGR. MARK THEDORICK D. SULLA	LEYTE, 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.



RONIE D. DAPROSA



Right Thumbmark


Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)

PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: DRIVER'S LICENSE

ID/License/Passport No.: H07-12-000077

Date/Place of Issuance: 08/05/2022



Signature (Sign inside the box)

12/6/2024

Date Accomplished

SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath

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