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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes [_]) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 1. CS ID No. I. PERSONAL INFORMATION 2. SURNAME POSAS NAME EXTENSION (JR., SR) FIRST NAME JULIET MIDDLE NAME **ESPERANZA** 3. DATE OF BIRTH OCTOBER 02, 2000 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/yyyy) by birth by naturalization Pls. indicate country: If holder of dual citizenship, BAYBAY CITY, LEYTE 4. PLACE OF BIRTH please indicate the details 5. SEX Male ✓ Female KAABING Married 17. RESIDENTIAL ADDRESS ✓ Single 6 CIVIL STATUS House/Block/Lot No. Street Widowed Separated **POMPONAN** Other/s: Barangay Subdivision/Village LEYTE BAYBAY CITY 7. HEIGHT (m) 1.53 Province City/Municipality ZIP CODE 8. WEIGHT (kg) 63 KAABING 18. PERMANENT ADDRESS 9. BLOOD TYPE N/A House/Block/Lot No. Street POMPONAN 10. GSIS ID NO. N/A Subdivision/Village Barangay BAYBAY CITY 11. PAG-IBIG ID NO. 121348583122 City/Municipality Province 6521 12. PHILHEALTH NO. 13-250357003-7 ZIP CODE 19. TELEPHONE NO. N/A 13. SSS NO. N/A 09169455710 N/A 20. MOBILE NO. 14. TIN NO. juliet.esperanza@vsu.edu.ph 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) **FAMILY BACKGROUND** DATE OF BIRTH (mm/dd/yyyy) 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME **BUSINESS ADDRESS** TELEPHONE NO. **POSAS** 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) **RENARIO** FIRST NAME **PENETRADO** MIDDLE NAME 25. MOTHER'S MAIDEN NAME **ESPERANZA** SURNAME JULIETA FIRST NAME LLONES MIDDLE NAME (Continue on separate sheet if necessary) III. EDUCATIONAL BACKGROUND SCHOLARSHIP. HIGHEST LEVEL/ NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE PERIOD OF ATTENDANCE LEVEL YEAR ACADEMIC (Write in full) (Write in full) GRADUATED HONORS (if not graduated) RECEIVED From To ELEMENTARY POMPONAN ELEM. SCHOOL PRIMARY EDUCATION 2007 2013 **GRADUATED** 2013 SECONDARY POMPONAN NATIONAL HIGH SCHOOL JUNIOR HIGH SCHOOL 2013 2017 **GRADUATED** 2017 SENIOR HIGH **VISAYAS STATE UNIVERSITY** SENIOR HIGH SCHOOL **GRADUATED** 2017 2019 2019 COLLEGE VISAYAS STATE UNIVERSITY BACHELOR OF PHYSICAL EDUCATION 2019 2023 **GRADUATED** 2023 **GRADUATE STUDIES** SIGNATURE DATE FEBRUARY 05, 2025

	ERVICE ELIGIBIL		ene a management	DATE OF				LICENSE (if a	
CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable)						ATION / CONFERMENT		NUMBER	Date of Validity
LICE	LICENSED PROFESSIONAL TEACHER 80		80.40	03/17/2024 TACL		.OBAN		2200952	10/02/20
									-
			(Con	tinue on separate sheel	if necessary)				
WORK E	EXPERIENCE rate employment.	Start from your recent	work) Description	of duties should be	indicated in the attached	Work Exper			
	USIVE DATES nm/dd/yyyy)	POSITION T (Write in full/Do not		DEPARTMENT / AG (Write in ful	ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVIC (Y/N)
3/01/2024	PRESENT	ADMIN AII	DE III	ACC	COUNTING	13,277.00	N/A	J.O	N/A
3/20/2024	05/20/2024	ADMIN AII			COUNTING	13,277.00	N/A	J.0	N/A
0/09/2023	12/08/2023	ADMIN AII		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	COUNTING	13,277.00	N/A	J.0	N/A
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	IATURE		(Cor	ntinue on separate shee	t if necessary) DATE			DIES SIGNIFICATION	

10 115			DI CHUTARY C	DO ANTATIO	W0		
VI. VOLUNTARY WORK OR INVOLVEMENT				RGANIZATIO	N/S		
9. NAME & ADDRESS OF ORGANIZATION (Write in full)		(mm/dd/yyyy) From To		NUMBER OF HOURS		POSITION / NATURE OF WORK	
CATECHIST			PRESENT	MAX. HRS.		CATECHIST	
COMMISION ON YOUTH, POMPONAN PARISH			PRESENT	MAX. HRS.		EDUCATION	
LECTORS AND COMMENTATORS, POMPONAN PARISH			PRESENT	MAX. HRS.		READER	
VII. LEARNING AND DEVELOPMENT (L&D)		tinue on separate s ROGRAMS AT					
30. TITLE OF LEARNING AND DEVELOPMENT INTO	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		DATES OF DANCE d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
Diocesan School Year Catechist Refresher Seminar 2	024	96/24/2024	To 06/25/2024	14		Bishop's Residence Compound, Asuncion, Maasin	
Diocesan Summer Catechist Refresher Seminar 2022		04/05/2024	04/06/2024	14		City Holy Child Parish, Bato Leyte	
Training/Workshop on Advanced Microsoft Excel Fun Transaction Processing and Reporting Workshop		11/28/2023	11/28/2023	4		Visayas State University	
Diocesan School Year Catechist Refresher Seminar 2	023	08/07/2023	08/08/2023	14		Bishop's Residence Compound, Asuncion, Maasi City	
Student Teaching Internship Course at MAPEH Depar	tment - Baybay National High School	03/07/2023	05/15/2023	360		Baybay National High School	
Gender Equality, Disability, and Social Inclusions: Ch	ild Centered Teaching Strategies	04/14/2023	04/14/2023	4		Visayas State University	
Sports Clinic: Organizing, Managing, and Officiating	Competition	04/03/2023	04/03/2023	8		Visayas State University	
Gender Equality and Inclusive Society			03/24/2023	4		Baybay National High School	
Leaving No One Behind		03/17/2023	03/17/2023	4		Baybay National High School Bishop's Residence Compound, Asuncion, Maasi	
Diocesan School Year Catechist Refresher Seminar 2022		07/31/2022	08/01/2022	14		City	
1			_ 1				
	(0.0	4					
VIII. OTHER INFORMATION	(Con	tinue on separate	anuet ii necessar	"			
31. SPECIAL SKILLS and HOBBIES	32. NON	-ACADEMIC DISTII	NCTIONS / RECO	GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
INTERPERSONAL SKILLS	N/A					COMMISSION ON YOUTH	
MICROSOFT SKILLS	N/A					COMMISSION ON YOUTH	
		tique on separate	chapt H	net .	The second secon	THE RESERVE OF THE PERSON OF T	

34. Ar	re you related by consanguinity or affinity to the appointing	or recommending authority, or to the					
ch	nief of bureau or office or to the person who has immediate:	supervision over you in the Office,					
	ureau or Department where you will be apppointed,						
	within the third degree?		YES	☑ NO			
	within the fourth degree (for Local Government Unit - Care	er Employees)?	☐ YES	✓ NO			
J.	within the lourd degree (for Local Government only out	If YES, give detail					
			ii i Eo, givo colaiii				
35 2	Have you ever been found guilty of any administrative offer	nee?	☐ YES	☑ NO			
35. a.	have you ever been found guilty of any administrative one	iser	If YES, give detail				
		1177	II TES, give detail	5.			
b.	Have you been criminally charged before any court?	☐ YES	✓ NO				
	that's you been diffillingly charged belove any court	If YES, give detail	s:				
		Date Filed:					
		Status of Case/s:					
36. Ha	ave you ever been convicted of any crime or violation of an	law, decree, ordinance or regulation by	YES	✓ NO			
	ny court or tribunal?	, 1211, 200100, 0101111111	If YES, give detail				
			ii i zo, give domi				
		///					
	ave you ever been separated from the service in any of the		YES	✓ NO			
	ropped from the rolls, dismissal, termination, end of term, fir	hished contract or phased out (abolition) in	If YES, give detail	S:			
	e public or private sector?						
	Have you ever been a candidate in a national or local electrogram electronic	tion held within the last year (except	YES	✓ NO			
De	arangay election)?		If YES, give details:				
b.	Have you resigned from the government service during the	e three (3)-month period before the last	☐ YES ✓ NO				
el	ection to promote/actively campaign for a national or local of	If YES, give details:					
39. Ha	ave you acquired the status of an immigrant or permanent	resident of another country?	☐ YES	☑ NO			
			If YES, give details (country):				
			, g				
40 P	ursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag	na Carta for Disabled Persons (RA 7277):					
	nd (c) Solo Parents Welfare Act of 2000 (RA 8972), please						
	re you a member of any indigenous group?	•	□ vec	✓ NO			
, ,	to you a monitor of any margonous group.		STATES YES If YES, please specif	y:			
b. A	re you a person with disability?		☐ YES	✓ NO			
			If YES, please specify ID No:				
c. A	re you a solo parent?		☐ YES	✓ NO			
			If YES, please specif	y ID No:			
41. RE	EFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)					
	NAME	ADDRESS	TEL. NO.	1			
	SHEILA O. SOLIANO	BAYBAY CITY LEYTE	9756916709				
	JASPER PAUL YCOY	MAKINHAS BAYBAY CITY LEYTE	9606647958	1 63 1			
	EDILBERTO A. ARTIGA JR. II	BAYBAY CITY LEYTE	9120388261				
	declare under oath that I have personally accomplished						
	omplete statement pursuant to the provisions of pertino			POSAS, JULIET E.			
	hilippines. I authorize the agency head/authorized represe			aster trendred			
	gree that any misrepresentation made in this docu dministrative/criminal case/s against me.	ment and its attachments shall caus	e the filing of	PHOTO			
al	ummisuauve/cumma case/s against me.						
Gove	emment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)						
125 137	ASE INDICATE ID Number and Date of Issuance	~ 0					
Gove	mment Issued ID: Professional Identification Card						
-			100				
ID/Lic	cense/Passport No.: 2200952	ox)					
Date/	Place of Issuance: 06/27/2024						
_		Date Accomplished		Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	affiant exhibit	ing his/her validly issue	government ID as indicated above.			
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		Person Administering Oat					