

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)

I. PERSONAL INFORMATION

2. SURNAME	ROSAUPAN		
FIRST NAME	VINCE JARNY	NAME EXTENSION (JR., SR)	
MIDDLE NAME	MAHAIT		
3. DATE OF BIRTH (mm/dd/yyyy)	12/08/1997	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	BAYBAY, LEYTE	If holder of dual citizenship, please indicate the details.	<input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Pls. indicate country:
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	Philippines ▼
7. HEIGHT (m)	1.75 M	ZIP CODE	House/Block/L of No. Street
8. WEIGHT (kg)	115 KG		BARANGAY COGON
9. BLOOD TYPE	O+		Subdivision/Village Barangay
10. GSIS ID NO.	N/A		BAYBAY CITY LEYTE
11. PAG-IBIG ID NO.	9183-0491-8798	City/Municipality Province	6521
12. PHILHEALTH NO.	13-250407989-2	18. PERMANENT ADDRESS	House/Block/L of No. Street
13. SSS NO.	06-4166938-9	ZIP CODE	BARANGAY HIBUNAWAN
14. TIN NO.	356-144-204-0000		Subdivision/Village Barangay
15. AGENCY EMPLOYEE NO.	N/A		BAYBAY CITY LEYTE
16. E-MAIL ADDRESS (if any)	vincejarn@gmail.com		City/Municipality Province
17. TELEPHONE NO.	N/A	19. MOBILE NO.	09627112952
20. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	vincejarn@gmail.com

II. FAMILY BACKGROUND

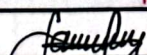
22. SPOUSE'S SURNAME	N/A		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	ROSAUPAN			
FIRST NAME	ARVIN	NAME EXTENSION (JR., SR)		
MIDDLE NAME	MADERAZO			
25. MOTHER'S MAIDEN NAME				
SURNAME	MAHAIT			
FIRST NAME	JOSEPHINE			
MIDDLE NAME	CANEJA			

(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	BAYBAY I CENTRAL SCHOOL	Basic Education Curriculum	2004	2010	N/A	2010	N/A
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	Science and Technology Program (S & T)	2010	2014	N/A	2014	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	SAINT PAUL SCHOOL OF PROFESSIONAL STUDIES	BACHELOR OF SCIENCE IN ACCOUNTING TECHNOLOGY	2016	2018	N/A	2018	N/A
GRADUATE STUDIES	LEYTE NORMAL UNIVERSITY	MASTERS IN MANAGEMENT	2018	2024	33 units	N/A	N/A


(Continue on separate sheet if necessary)

SIGNATURE		DATE	October 14, 2024
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[illegible]

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	October 14, 2024

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


[illegible]

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
READING BOOKS	N/A	THE INSTITUTE OF CERTIFIED BOOKKEEPERS
ARTS & DECORATIONS		NATIONAL INSTITUTE OF ACCOUNTING TECHNICIANS
PROFICIENT IN USING MICROSOFT SOFTWARES/ TOOLS		PHILIPPINE JUNIOR JAYCEES INCORPORATED METRO TACLOBAN RUPERTO KANGLEON
KNOWLEDGEABLE ON BASIC ACCOUNTING		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	October 14, 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: END OF CONTRACT

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.
NIEMAR ABALO	BAYBAY CITY, LEYTE	09970758911
ANGELLI D. CAIDOY	DULAG, LEYTE	09481214738
RENELAINE V. CAGARA	HINDANG, LEYTE	09187997202



PHOTO

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.

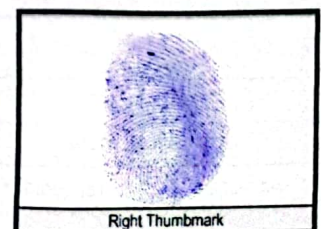
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: **13-250407989-2**

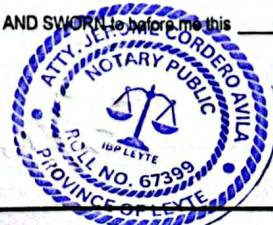
ID/License/Passport No.: **1212-3799-4061**

Date/Place of Issuance: **07/01/2023**

Signature (Sign inside the box)
OCTOBER 14, 2024
Date Accomplished



SUBSCRIBED AND SWORN to before me this **OCT 18, 2024**, affiant exhibiting his/her validly issued government ID as indicated above.



ATTY. JEROME CORDERO AVILA
NOTARY PUBLIC FOR TACLOBAN CITY, LEYTE
N.C. No. 2023-04-79 UNTIL DECEMBER 31, 2024
ROLL OF ATTORNEYS No. 67399
Person Administering Oath
AVILA DE VEYRA & ROBINO LAW OFFICE
COR. P. BURGOS & JUAN LUNA STS., BRGY 30, TACLOBAN CITY