

PERSONAL DATA SHEET

WARNING: Any misinterpretation 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	PURAY			
	FIRST NAME	JAILENN JANNARAINÉ	NAME EXTENSION (JR., SR)	
	MIDDLE NAME	SABARIA		
3. DATE OF BIRTH (mm/dd/yyyy)	7/24/1998	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.	<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	MUNTINLUPA CITY			
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	N/A	
			House/Block/Lot No.	
			PENSERGA SUBD.	
7. HEIGHT (m)	1.54		Subdivision/Village	
8. WEIGHT (kg)	43		ORMOC CITY	
9. BLOOD TYPE	AB		City/Municipality	
10. GSIS ID NO.	N/A		6541	
11. PAG-IBIG ID NO.	121269303484	18. PERMANENT ADDRESS	N/A	
12. PHILHEALTH NO.	1325-0754-6807			House/Block/Lot No.
13. SSS NO.	34-9319844-5			PENSERGA SUBD.
14. TIN NO.	364 642 074 0000		Subdivision/Village	
15. AGENCY EMPLOYEE NO.	N/A		ORMOC CITY	
			City/Municipality	
			6541	
		19. TELEPHONE NO.	N/A	
		20. MOBILE NO.	09459749569	
		21. E-MAIL ADDRESS (if any)	jailennp@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	NAME EXTENSION (JR., SR)		
	MIDDLE NAME			
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	PURAY			
	FIRST NAME	NAME EXTENSION (JR., SR)		
	MIDDLE NAME	GONO		
25. MOTHER'S MAIDEN NAME	JERALENN Z. SABARIA			
	SURNAME	SABARIA		
	FIRST NAME	JERALENN		
	MIDDLE NAME	ZAMORA		

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)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	ORMOC CITY CENTRAL SCHOOL	N/A	2005	2011	GRADUATE	2011	SALUTATORIAN
SECONDARY	NEW ORMOC CITY NATIONAL HIGH SCHOOL	N/A	2011	2015	GRADUATE	2015	1ST HONORABLE MENTION
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BS CHEMISTRY	2015	2019	GRADUATE	2019	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A		N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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IV. CIVIL SERVICE ELIGIBILITY

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
	PD 907 HONOR GRADUATE	N/A	11/22/2019	Civil Service Commission, Government Center, Palo, Leyte	N/A	N/A
	RA 1080 CHEMIST	75.4	10/9/2019 TO 10/10/2019	CEBU CITY	0014608	7/24/2022
	RA 1080 CHEMICAL TECHNICIAN	87.0	10/11/2019	CEBU CITY	0003532	7/24/2022

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

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

[illegible]

(Continue on separate sheet if necessary)

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

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
N/A					

(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)

30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
N/A						

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	READING	N/A		INTEGRATED CHEMISTS OF THE PHILIPPINES
	DANCING			

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person who has immediate supervision over you in the Bureau or Department where you will be appointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>	
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>	
		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>	
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>	
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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>	
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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>	
		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>	
39. Have you acquired the status of an immigrant or permanent resident of another country?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>	
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 a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify: _____</div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify ID No: _____</div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify ID No: _____</div></div>	
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)			
NAME		ADDRESS	TEL. NO.
DR. CANDELARIO L. CALIBO		BAYBAY CITY	9176341486
KAY KIMBERLY KOBAYASHI		ORMOC CITY	9178570583
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.			
<div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: PRC LICENSE</div> <div>ID/License/Passport No.: 0014608</div> <div>Date/Place of Issuance: 10/18-2019 ORMOC CITY</div>		<div></div> <div>Signature (Sign inside the box)</div> <div></div> <div>Date Accomplished</div>	
		<div></div> <div>Right Thumbmark</div>	
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.			
<div></div> <div>Person Administering Oath</div>			

WORK EXPERIENCE SHEET

Duration: April 2021 – Present

- Position: Part-time Instructor
- Name of Office/Unit: Department of Pure and Applied Chemistry
- Immediate Supervisor: Elizabeth S. Quevedo
- Name of Agency/Organization and Location: Visayas State University – Baybay City, Leyte
- Summary of Actual Duties
 - Conducts lecture and laboratory classes in the assigned chemistry subjects
 - Documents students' attendance, participation, and academic progress by giving and grading laboratory reports, assignments, projects, quizzes and examinations that lead to a final grade
 - Attends faculty meetings to evaluate student progress and determine improvement strategies for students
 - Performs academic related functions, duties and responsibilities

Duration: July 2020 – January 2021

- Position: Project-Based Laboratory Analyst
- Name of Office/Unit: Metallurgical Laboratory Division
- Immediate Supervisor: Charito Bonul
- Name of Agency/Organization and Location: Philippine Associated Smelting and Refining Corporation, Isabel, Leyte
- Summary of Actual Duties
 - Conducted water analysis of different parameters and elements following procedure protocols.
 - Operated and maintained all designated instruments and equipment.
 - Followed safety and security procedures when handling hazardous materials.

Duration: June – July 2018

- Position: Intern
- Name of Office/Unit: Integrated Laboratory Services
- Immediate Supervisor: Gleenecce Jad Rosal
- Name of Agency/Organization and Location: Energy Development Corporation, Tongonan, Leyte
- Summary of Actual Duties
 - Conducted analyses in the laboratory; provided assistance for the ISO documentation and audit preparation
 - Updated Material Safety Data Sheet.
 - Listed inventory for chemicals, glasswares and equipment spare

Duration: April – May 2015

- Position: Summer Job
- Name of Office/Unit: City Treasurer's Office
- Name of Agency/Organization and Location: LGU Ormoc, Ormoc City Hall
- Summary of Actual Duties
 - Responsible in performing technical tasks e.g., collection of rental fee from public market vendors, provided assistance on the preparation of daily report and other related functions.

(Signature over Printed Name
of Employee/Applicant)

Date: _____