

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.

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	SABINO		
FIRST NAME	RICKY	NAME EXTENSION (JR., SR)	
MIDDLE NAME	VILLAMOR		
3. DATE OF BIRTH (mm/dd/yyyy)	8/26/89	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:
4. PLACE OF BIRTH	ORMOC CITY	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input 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	BLOCK 10 LOT 15 House/Block/Lot No. Street DECA HOMES CONCEPCION Subdivision/Village Barangay ORMOC LEYTE City/Municipality Province ZIP CODE 6541
7. HEIGHT (m)	1.63 m	18. PERMANENT ADDRESS	BLOCK 10 LOT 15 House/Block/Lot No. Street DECA HOMES CONCEPCION Subdivision/Village Barangay ORMOC LEYTE City/Municipality Province ZIP CODE 6541
8. WEIGHT (kg)	65 kg		19. TELEPHONE NO.
9. BLOOD TYPE	O	20. MOBILE NO.	+63 917 129 0209 or +63 947 813 0173
10. GSIS ID NO.	N/A	21. E-MAIL ADDRESS (if any)	rickysabino2016@gmail.com
11. PAG-IBIG ID NO.	121067581702		
12. PHILHEALTH NO.	060501016511		
13. SSS NO.	01-2035203-6		
14. TIN NO.	416-675-227		
15. EMPLOYEE NO.	N/A		

BACKGROUND

22. SPOUSES 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	SABINO			
FIRST NAME	JEGER	NAME EXTENSION (JR., SR)		
MIDDLE NAME	MALILAY			
25. MOTHER'S MAIDEN NAME				
SURNAME	VILLAMOR			
FIRST NAME	MA. DANITA			
MIDDLE NAME	PILAPIL		(Continue on separate sheet if necessary)	

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	CURVA ELEMENTARY SCHOOL	ELEMENTARY EDUCATION	1996	2002	N/A	2002	First Honorable Mention
SECONDARY	NEW ORMOC CITY NATIONAL HIGH SCHOOL	SECONDARY EDUCATION	2002	2006	N/A	2006	Honorable Mention
VOCATIONAL / TRADE COURSE	N/A	N/A					
COLLEGE	LAGUNA NORTHWESTERN COLLEGE	AB PHILOSOPHY	2006	2010	N/A	2010	
GRADUATE STUDIES	UNIVERSITY OF THE VISAYAS	MASTER OF ARTS IN EDUCATION MAJOR IN GUIDANCE AND COUNSELING	2014	2016	N/A	2016	DISTINCTION

(Continue on separate sheet if necessary)

SIGNATURE		DATE	September 12, 2025
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IV. CIVIL SERVICE ELIGIBILITY

27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE ELIGIBILITY / DRIVER'S LICENSE BARANGAY	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	LICENSED PROFESSIONAL SECONDARY TEACHER		5/4/17	CEBU CITY	1533075	8/26/28
	REGISTERED GUIDANCE COUNSELOR		11/11/22	PASAY CITY, METRO MANILA	0004265	8/26/28

(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

Sakino

DATE _____

SEPTEMBER 12, 2025

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			
	Bayanihan E-Konsulta (Angat Buhay Foundation)	7/14/05	7/16/05	32.0	Volunteer, online counseling	
	Tuloy Foundation, Inc.	7/15/05	7/17/05	74.0	Volunteer, individual and group counseling	
(Continue on separate sheet if necessary)						
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED						
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			
	8th International Congress: Action Research, Action Learning (Aral2025)	5/25/25	5/25/25	8	Technical	1PhysEd.Ph Training and Development Services
	Suicide Prevention Course (Non-Credit)	2/1/23	2/18/23	60.0	Technical	Wesleyan University
	Training Workshop on Gender-Responsive Basic Education Policy cum Responding to Mental Health Concerns for Teachers	11/18/22	11/18/22	8.0	Technical	Philippine Guidance and Counseling Association
	Applying Resilience Practices in the Context of Crisis and Online Counseling	9/2/22	9/2/22	8.0	Technical	Asian Psychological Services and Assessment
	Enhancing Mental Health Services Through Capacity Building Among Professional and Volunteers in the New Normal	10/13/22	10/14/22	20.0	Technical	Association of Psychological and Educational Counselors
	School Mental Management: Suicide Prevention, Intervention, and Postvention Protocol	8/17/21	8/17/21	8.0	Technical	Catholic Educational Association of the Philippines
	Webinar on Journey to Healing: Counseling the Sexually Abused	7/29/21	7/29/21	8.0	Technical	Philippine Guidance and Counseling Association
	The Filipino Counselor Amidst the Challenges of the Times	5/19/21	5/21/21	20.0	Technical	Philippine Guidance and Counseling Association
	7th Asian Cognitive Behavior Therapy Conference	6/25/21	6/25/21	8.0	Technical	Asian Cognitive Behavior Therapy Association
	Telepsychology Guidelines and Issues	6/30/20	6/30/20	8.0	Foundation	De La Salle University
	Caring for Victim of Violence, Neglect and Abuse	6/25/20	6/25/20	8.0	Technical	De La Salle University
	Grit and the Filipino Students	7/3/20	7/3/20	8.0	Foundation	De La Salle University
	Children, Resilience, and the Art of Bouncing Back	7/3/20	7/3/20	8.0	Foundation	De La Salle Santiago Zobel School
	Emotional First Aid for Children and Adolescents in COVID-19	6/10/20	6/10/20	8.0	Technical	Asian Psychological Services and Assessment
	Counseling Strategies: Tools Among the Digital Natives in the New Normal	6/3/20	6/3/20	8.0	Technical	Philippine Guidance and Counseling Association
	Trauma Informed Care and Psychological Processing	6/10/20	6/10/20	8.0	Technical	Philippine Guidance and Counseling Association
	Motivational Interviewing Course: Basic Understanding	6/3/20	6/3/20	8.0	Technical	International Society of Substance Use Professionals
				204.0		
(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		Best in Leadership Award		Philippine Guidance and Counseling Association	
	Hiking		Excellence in Service Award		Association of Psychological and Educational Counselors	
	Cooking					
	Writing					
	Hosting					
	Singing					
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	SEPTEMBER 12, 2025	

<div>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)?</div>		<div><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></div>													
<div>35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?</div>		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div></div></div>													
<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>		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div></div>													
<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>		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div></div>													
<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>		<div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div></div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div></div></div>													
<div>39. Have you acquired the status of an immigrant or permanent resident of another country?</div>		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details (country): _____</div></div>													
<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 items: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?</div>		<div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify: _____</div></div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify ID No: _____</div></div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify ID No: _____</div></div></div>													
<div>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</div> <table><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr><tr><td>Available upon request (in accordance to data privacy law)</td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></table>				NAME	ADDRESS	TEL. NO.	Available upon request (in accordance to data privacy law)								
NAME	ADDRESS	TEL. NO.													
Available upon request (in accordance to data privacy law)															
<div>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>		<div><div><div>ID picture taken within the last 6 months 4.5 cm. X 3.5 cm (passport size) Computer generated or photocopied picture is not acceptable</div><div>NOT AVAILABLE</div><div>PHOTO</div></div><div><div>NOT AVAILABLE</div><div>Right Thumbmark</div></div></div>													
<div><div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div><div><div>Government Issued ID: UMD</div><div>ID/License/Passport No.: 0111-4214497-5</div><div>Date/Place of Issuance: Ormoc City</div></div></div>		<div><div><div><div></div><div>Signature (Sign inside the box)</div><div>September 12, 2025</div><div>Date Accomplished</div></div></div></div>													
<div>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</div> <div><div></div><div>Person Administering Oath</div></div>															