

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)

PERSONAL INFORMATION

2. SURNAME	ANG		
FIRST NAME	LYN		NAME EXTENSION (JR., SR)
MIDDLE NAME	AMPONG		
3. DATE OF BIRTH (mm/dd/yyyy)	08/17/2000	16. CITIZENSHIP	<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	HINUNANGAN, SOUTHERN LEYTE	If holder of dual citizenship, please indicate the details.	
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	PUROK 1 Street TALISAY Barangay SOUTHERN LEYTE Province 6608
7. HEIGHT (m)	1.51	18. PERMANENT ADDRESS	PUROK 1 Street TALISAY Barangay SOUTHERN LEYTE Province 6608
8. WEIGHT (kg)	57	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	A+	20. MOBILE NO.	09771059372
10. GSIS ID NO.	N/A	21. E-MAIL ADDRESS (if any)	anglyn17@gmail.com
11. PAG-IBIG ID NO.	121333985594		
12. PHILHEALTH NO.	13-251630278-3		
13. SSS NO.	0646597016		
14. TIN NO.	N/A		
15. AGENCY EMPLOYEE NO.	N/A		

FAMILY BACKGROUND


22. SPOUSE'S SURNAME			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	ANG			
FIRST NAME	BERLIN	NAME EXTENSION (JR., SR)		
MIDDLE NAME	BALIAD			
25. MOTHER'S MAIDEN NAME				
SURNAME	AMPONG			
FIRST NAME	REBECCA			
MIDDLE NAME	VALIENTE			

(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	CANIPAAN ELEMENTARY SCHOOL	PRIMARY EDUCATION	06/11/2007	03/10/2013		2013	FIRST HONORABLE MENTION
SECONDARY	CANIPAAN NATIONAL HIGH SCHOOL	SCIENCE, TECHNOLOGY, ENGINEERING AND MATHEMATICS	06/06/2013	4/22/2019		2019	HIGH HONOR
VOCATIONAL / TRADE COURSE							
COLLEGE	EASTERN VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN CIVIL ENGINEERING	08/05/2019	6/19/2023		2023	
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	08/14/2024
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IV. CIVIL SERVICE ELIGIBILITY


[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	02 / 14 / 2024


[illegible]

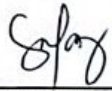
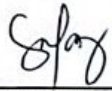
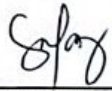



VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/ TRAINING PROGRAMS ATTENDED

[illegible]

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		
SINGING		
PLAYING VOLLEYBALL		

SIGNATURE		DATE	01/14/2024
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<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>Status of Case/s: _____</p>												
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>												
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>												
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>MERLEE B. PENSONA</td> <td>BRGY. GUINTAGBUCAN, ABUYOG LEYTE</td> <td>9762878856</td> </tr> <tr> <td>LOVE CHRISTINE R. DIONALDO</td> <td>BRGY. BUENAVISTA, JARO LEYTE</td> <td>9979774918</td> </tr> <tr> <td>SHENNITTE C. TAGNIPPEZ</td> <td>BRGY. BANGCAS B, HINUNANGAN SOUTHERN LEYTE</td> <td>9317207042</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	MERLEE B. PENSONA	BRGY. GUINTAGBUCAN, ABUYOG LEYTE	9762878856	LOVE CHRISTINE R. DIONALDO	BRGY. BUENAVISTA, JARO LEYTE	9979774918	SHENNITTE C. TAGNIPPEZ	BRGY. BANGCAS B, HINUNANGAN SOUTHERN LEYTE	9317207042
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<p>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.</p>													
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<p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; width: 250px; height: 60px; margin: 10px auto; text-align: center;"> <p>Person Administering Oath</p> </div>													