

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	ESPONILLA		
FIRST NAME	JINNALYN	NAME EXTENSION (JR., SR.)	
MIDDLE NAME	SIALONGO		
3. DATE OF BIRTH (mm/dd/yyyy)	10/31/1992	15. 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	KANANGA	if holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	ZONE 1 Street NATUBGAN Barangay KANANGA LEYTE City/Municipality Province
7. HEIGHT (m)	5'3	18. PERMANENT ADDRESS	ZONE 1 Street NATUBGAN Barangay KANANGA LEYTE City/Municipality Province
8. WEIGHT (kg)	50 KG	19. TELEPHONE NO.	NONE
9. BLOOD TYPE	O+	20. MOBILE NO.	09105179671
10. GSIS ID NO.	NONE	21. E-MAIL ADDRESS (if any)	SHANGJHIN@GMAIL.COM
11. PAG-IBIG ID NO.	1211-8166-4176		
12. PHILHEALTH NO.	13-025428147-7		
13. SSS NO.	06-3873649-0		
14. TIN NO.	331-472-153		
15. AGENCY EMPLOYEE NO.	NONE		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	ESPONILLA		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ARNOLD	NAME EXTENSION (JR., SR.)	N/A	N/A
MIDDLE NAME	PASTRANA			
OCCUPATION	OFFICE STAFF-BRANCH SUPPORT OFFICER			
EMPLOYER/BUSINESS NAME	NWTF			
BUSINESS ADDRESS	BACOLOD CITY			
TELEPHONE NO.	NONE			
24. FATHER'S SURNAME	SIALONGO			
FIRST NAME	ELENO	NAME EXTENSION (JR., SR.)		
MIDDLE NAME	MONACHO			
25. MOTHER'S MAIDEN NAME				
SURNAME	LOPEZ			
FIRST NAME	LEAH			
MIDDLE NAME	MERQUILLO			

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	KANANGA CENTRAL SCHOOL	ELEMENTARY	6/6/2000	3/30/2006	GRADUATED	2006	ACHIEVER
SECONDARY	PRIMONA HOLY INFANT ACADEMY INC.	HIGHSCHOOL	6/4/2006	4/2/2010	GRADUATED	2010	2ND HONORABLE MENTION
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	JOSE NAVARRO POLYTECHNIC COLLEGE	COLLEGE	6/6/2012	4/4/2016	GRADUATED	2016	BEST PRACTICE TEACHER
GRADUATE STUDIES	N/A						

SIGNATURE		DATE	June 5, 2020
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IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

<p>V. WORK EXPERIENCE</p>	
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(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)

John

JUNE 5, 2027


[illegible]







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

[illegible]

IV. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
COMPUTER LITERATE	N/A	N/A
COOKING	N/A	N/A
PLAYING BADMINTON	N/A	N/A

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	June 5, 2029

<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>DEMAR REBADOMIA</td><td>MAASIN CITY</td><td>9992249830</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	DEMAR REBADOMIA	MAASIN CITY	9992249830								
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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; line-height: 60px;">Person Administering Oath</div>															