

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	ESTRERA						
FIRST NAME	ALTHEA KRYZIAH					NAME EXTENSION (JR., SR.) N/A	
MIDDLE NAME	JABILLO						
3. DATE OF BIRTH (mm/dd/yyyy)	08/30/2000		18. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country: N/A			
4. PLACE OF BIRTH	ORMOC CITY, 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:						
7. HEIGHT (m)	1.57		17. RESIDENTIAL ADDRESS		348 N/A		
8. WEIGHT (kg)	50				House/Block/Lot No. Street		
9. BLOOD TYPE	B+				Subdivision/Village TABGAS		
10. GSIS ID NO.	N/A				City/Municipality ALBUERA LEYTE		
11. PAG-BIG ID NO.	121322089878				Province		
12. PHILHEALTH NO.	130255811090		ZIP CODE		0542		
13. SSS NO.	35-1707262-5		18. PERMANENT ADDRESS		348 N/A		
14. TIN NO.	605-935-766		19. TELEPHONE NO.		N/A		
15. AGENCY EMPLOYEE NO.	N/A		20. MOBILE NO.		09655705123		
16. AGENCY EMPLOYEE NO.			21. E-MAIL ADDRESS (if any)		altheakryziah@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	
MIDDLE NAME	N/A			N/A		N/A	
OCCUPATION	N/A						
EMPLOYER/BUSINESS NAME	N/A						
BUSINESS ADDRESS	N/A						
TELEPHONE NO.	N/A						
24. FATHER'S SURNAME	ESTRERA						
FIRST NAME	DIOCELES			NAME EXTENSION (JR., SR.)			
MIDDLE NAME	PEROSO			N/A			
25. MOTHER'S MAIDEN NAME	JABILLO						
SURNAME	ARISTEA						
FIRST NAME	SINGSON						
MIDDLE NAME							
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	TABGAS ELEMENTARY SCHOOL	N/A	2006	2012	N/A	2012	1ST HONOR
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	N/A	2012	2018	N/A	2018	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN CIVIL ENGINEERING	2018	2022	N/A	2022	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A
(Continue on separate sheet if necessary)							
SIGNATURE			DATE		MAY 17, 2024		

[illegible]

V. WORK EXPERIENCE

[illegible]

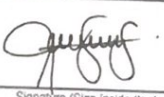
(Continue on separate sheet if necessary)

SIGNATURE

DATE _____

MAY 17, 2024

[illegible]

<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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: RESIGNATION FROM MY PREVIOUS EMPLOYMENT</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: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>ENGR. RAMIL B. VINCULADO, JR.</td> <td>HILONGOS, LEYTE</td> <td>N/A</td> </tr> <tr> <td>ENGR. NICK C. SOLOMON</td> <td>TACLOBAN CITY, LEYTE</td> <td>N/A</td> </tr> <tr> <td>ENGR. ANDY PHIL CORTES</td> <td>BAYBAY CITY, LEYTE</td> <td>N/A</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	ENGR. RAMIL B. VINCULADO, JR.	HILONGOS, LEYTE	N/A	ENGR. NICK C. SOLOMON	TACLOBAN CITY, LEYTE	N/A	ENGR. ANDY PHIL CORTES	BAYBAY CITY, LEYTE	N/A
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ENGR. ANDY PHIL CORTES	BAYBAY CITY, LEYTE	N/A											
<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>													
<p>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</p> <p>PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government issued ID: PRC</p> <p>ID/License/Passport No.: 0190302</p> <p>Date/Place of Issuance: JUNE 20, 2023 / ORMOC</p>	<p></p> <p>Signature (Sign inside the box)</p> <p>MAY 17, 2024</p> <p>Date Accomplished</p>												
<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: 200px; height: 40px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>													



ESTRERA, ALTHEA KRYZIAH J.



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