

# 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	Mejor		
FIRST NAME	Sheena		NAME EXTENSION (JR., SR)
MIDDLE NAME	Mendoza		
3. DATE OF BIRTH (mm/dd/yyyy)	13/02/1994	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	Viga, Catanduanes	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
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	House/Block/Lot No. _____ Street _____ Zone 4 Subdivision/Village _____ Barangay _____ Baybay City _____ Leyte City/Municipality _____ Province _____ ZIP CODE 6521
7. HEIGHT (m)	1.58	18. PERMANENT ADDRESS	House/Block/Lot No. _____ Street _____ Zone 4 Subdivision/Village _____ Barangay _____ Baybay City _____ Leyte City/Municipality _____ Province _____ ZIP CODE 6521
8. WEIGHT (kg)	47		
9. BLOOD TYPE	A+	19. TELEPHONE NO.	N/A
10. GSIS ID NO.	N/A	20. MOBILE NO.	09972852982
11. PAG-IBIG ID NO.	N/A	21. E-MAIL ADDRESS (if any)	sheenamendoza64@gmail.com
12. PHILHEALTH NO.	03-05108286710		
13. SSS NO.	N/A		
14. TIN NO.	437-840-761-000		
15. AGENCY EMPLOYEE NO.	N/A		

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Mejor		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Edgardo	NAME EXTENSION (JR., SR)	Kisses Mendoza Mejor	02/09/2019
MIDDLE NAME	Damalerio			
OCCUPATION	Network Controller			
EMPLOYER/BUSINESS NAME	ATI-RTC8			
BUSINESS ADDRESS	Visca, Baybay City, Leyte			
TELEPHONE NO.	563-7635			
24. FATHER'S SURNAME	Mendoza			
FIRST NAME	Rowell	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Calizo			
25. MOTHER'S MAIDEN NAME				
SURNAME	Ogalesco			
FIRST NAME	Brenda			
MIDDLE NAME	Tolon		(Continue on separate sheet if necessary)	

## 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	Buenavista Elementary School	Primary	2000	2006	N/A	2006	Valedictorian
SECONDARY	Tambognon National High School	Secondary	2006	2010	N/A	2010	with honors
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	Franciscan Collge of the Immaculate Conception	Bachelor of Science in Business Administration-Major in Financial Management	2011	2016	N/A	2016	with honors
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	09/30/2021
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[illegible]

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

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

28	INCLUSIVE DATES				SALARY/ JOB PAY		
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[illegible]

SIGNATURE		DATE	09/30/2021
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fin

09/30/2021



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

[illegible]

(Continue on separate sheet if necessary)

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

[illegible]

(Continue on separate sheet if necessary)

## VIII. OTHER INFORMATION

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	09/30/2021
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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)?

☐ YES ☒ NO

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

35. a. Have you ever been found guilty of any administrative offense?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

b. Have you been criminally charged before any court?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

Date Filed: \_\_\_\_\_

Status of Case/s: \_\_\_\_\_

36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

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?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

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?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES ☒ NO

If YES, give details (country): \_\_\_\_\_

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?

☐ YES ☒ NO

If YES, please specify: \_\_\_\_\_

b. Are you a person with disability?

☐ YES ☒ NO

If YES, please specify ID No: \_\_\_\_\_

c. Are you a solo parent?

☐ YES ☒ NO

If YES, please specify ID No: \_\_\_\_\_

41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)

NAME	ADDRESS	TEL. NO.
Luvilla G. Alcober	Visca, Baybay City, Leyte	N/A
Annabelle M. Garciano	Baybay City, Leyte	N/A
Mark Anthony Alinsub	Baybay City, Leyte	N/A



PHOTO

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.

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)  
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: PhilHealth

ID/License/Passport No.: 03-051082867-0

Date/Place of Issuance: Baybay City, Leyte

Signature (Sign inside the box)

09/30/2021

Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this SEP 30 2021, affiant exhibiting his/her validly issued government ID as indicated above.

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Page No. 41  
Book No. 411  
Series of 2021

**ATTY. EDEN B. CHAVEZ-BUTAWAN**  
Notary Public for Province of Leyte, City of Baybay  
N.C No. B-19-01-04, February 6, 2019  
Until December 31, 2020  
(Extended Until December 31, 2021)-B.M. 3795  
R. Maguysay Avenue, Baybay City, Leyte  
PTR No. PL 5048349-12/07/20  
IBP No. 134494-12/11/20  
TIN No. 207-628-029  
Roll No. 42391

Person Administering Oath

MCLE Compliance No. VI-0011118

**WORK EXPERIENCE SHEET**

**Instructions:** 1. Include only the work experiences relevant to the position being applied for.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word *Present*, e.g., 1998-Present. Work experience should be listed starting with the most recent/present employment

- Duration: June 2021 – September 27, 2021
- Position: Branch Accountant
- Name of Office/Unit: Community Economic Ventures Inc.
- Name of Agency/Organization and Location: Community Economic Ventures Inc., Baybay City, Leyte

- Summary of Actual Duties

- Provides financial information to management by researching and analyzing **accounting** data; preparing reports. Prepares asset, liability, and capital account entries by compiling and analyzing account information. Documents financial transactions by entering account information and performs other related functions.

- Duration: January 2018 – May 2019
- Position: Branch Accountant
- Name of Office/Unit: Lamac Multi-Purpose Cooperative
- Name of Agency/Organization and Location: Lamac Multi-Purpose Cooperative, Baybay City, Leyte

- Summary of Actual Duties

- Provides financial information to management by researching and analyzing **accounting** data; preparing reports. Prepares asset, liability, and capital account entries by compiling and analyzing account information. Documents financial transactions by entering account information and performs other related functions.

- Duration: March 2016 – April 2017
- Position: Administrative Aide
- Name of Office/Unit: Supply
- Name of Agency/Organization and Location: Agricultural Training Institute-Regional Training Center 8, Visca, Baybay City, Leyte

- Summary of Actual Duties

- Assist in keeping track of the finances of the agency in relation to incoming and outgoing **supplies**. This involves preparation of purchase orders; coordinating the process of purchasing and distribution; and comparing purchase orders with invoices to ensure accuracy and performs other related functions.

- Duration: August 2013 – April 2017
- Position: Frontline Crew
- Name of Office/Unit: Chowking
- Name of Agency/Organization and Location: Chowking – SM North Edsa, Metro Manila

- Summary of Actual Duties

- Responsible for food preparation, customer service, and maintaining cleanliness and performs other related functions.

  
**SHEENA M. MEJOR**

(Signature over Printed Name of Employee/Applicant)

Date: 09/30/2021