

# 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	VERECIO		
FIRST NAME	MYRA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	DAYOC		
3. DATE OF BIRTH (mm/dd/yyyy)	1/5/1996	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	TOLOSA 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		
7. HEIGHT (m)	1.48		
8. WEIGHT (kg)	42		
9. BLOOD TYPE	N/A		
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	1211-6969-2877		
12. PHILHEALTH NO.	13-251026142-2		
13. SSS NO.	06-3833210-8		
14. TIN NO.	335-062-656		
15. AGENCY EMPLOYEE NO.	N/A		
17. RESIDENTIAL ADDRESS	ZONE 9A House/Block/Lot No. Street TELEGRAFO Subdivision/Village Barangay TOLOSA LEYTE City/Municipality Province ZIP CODE 6503		
18. PERMANENT ADDRESS	ZONE 9A House/Block/Lot No. Street TELEGRAFO Subdivision/Village Barangay TOLOSA LEYTE City/Municipality Province ZIP CODE 6503		
19. TELEPHONE NO.	N/A		
20. MOBILE NO.	09272823007		
21. E-MAIL ADDRESS (if any)	myraverecio@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	
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	VERECIO			
FIRST NAME	CRISENCIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	MORING			
25. MOTHER'S MAIDEN NAME				
SURNAME	DAYOC			
FIRST NAME	TERESITA			
MIDDLE NAME	ROCABO			

(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	TELEGRAFO ELEMENTARY SCHOOL	N/A	6/1/2002	3/31/2008		2008	N/A
SECONDARY	TOLOSA NATIONAL HIGH SCHOOL	N/A	6/1/2008	3/31/2012		2012	ACHIEVER
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A		N/A	N/A
COLLEGE	ST. PAUL SCHOOL OF PROFESSIONAL STUDIES	BS ACCOUNTING TECHNOLOGY	6/1/2012	3/31/2016		2016	N/A
GRADUATE STUDIES	ASIAN DEVELOPMENT FOUNDATION SCHOOL	SUPPLEMENTAL (EDUCATION)	10/1/2018	3/31/2019		2019	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	May 30, 2022
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[illegible]

## V. WORK EXPERIENCE




[illegible]

SIGNATURE		DATE	05/30/2022
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05/30/2022

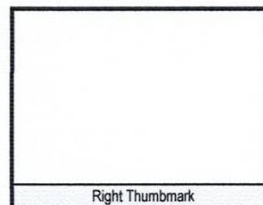




<p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed,</p> <p>a. within the third degree?</p> <p>b. within 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: <u>RESIGNED-CHANGE JOB</u></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: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>FLORA MAE GARRIDO</td> <td>TOLOSA LEYTE</td> <td>9309990780</td> </tr> <tr> <td>ERIKA ENCINA</td> <td>TANAUAN LEYTE</td> <td>9274942192</td> </tr> <tr> <td>JERRA MAE MERCADO</td> <td>TOLOSA LEYTE</td> <td>9501788647</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	FLORA MAE GARRIDO	TOLOSA LEYTE	9309990780	ERIKA ENCINA	TANAUAN LEYTE	9274942192	JERRA MAE MERCADO	TOLOSA LEYTE	9501788647
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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: 300px; height: 60px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>													



PHOTO



Right Thumbmark