

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 C9C use only)

I. PERSONAL INFORMATION

2. SURNAME	NEBRIDA		
FIRST NAME	JEANNE		NAME EXTENSION (JR., SR)
MIDDLE NAME	CORONG		
3. DATE OF BIRTH (mm/dd/yyyy)	DEC. 07, 2001	10. 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	TACLOBAN CITY	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	N/A House/Block/Lot No. Street N/A Subdivision/Village Barangay CATARMAN NORTHERN SAMAR City/Municipality Province
7. HEIGHT (m)	1.58 m	ZIP CODE	6400
8. WEIGHT (kg)	50 kg	18. PERMANENT ADDRESS	N/A House/Block/Lot No. Street N/A Subdivision/Village Barangay CATARMAN NORTHERN SAMAR City/Municipality Province
9. BLOOD TYPE	B+	ZIP CODE	6400
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	N/A	20. MOBILE NO.	09066193654
12. PHILHEALTH NO.	B-150916751-7	21. E-MAIL ADDRESS (if any)	annnebrida3@gmail.com
13. SSS NO.	N/A		
14. TIN NO.	N/A		
15. AGENCY EMPLOYEE NO.	N/A		

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			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	NEBRIDA			
FIRST NAME	GERREN	NAME EXTENSION (JR., SR)		
MIDDLE NAME	GARDENAS			
25. MOTHER'S MAIDEN NAME	AILEEN NAZA CORONG			
SURNAME	NEBRIDA			
FIRST NAME	AILEEN			
MIDDLE NAME	CORONG			

(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)	YEAR GRADUATED	SCHOLARSHIP, ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	CATARMAN ONE CENTRAL SCHOOL		06-2007	09-2013		2013	
SECONDARY	CATARMAN NATIONAL HIGH SCHOOL		06-2014	06-2020		2020	WITH HONOR
VOCATIONAL / TRADE COURSE							
COLLEGE	UNIVERSITY OF EASTERN PHILIPPINES	BACHELOR OF SCIENCE MARINE BIOLOGY	09-2021	05-2024		2024	CHM LAURE
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	JULY 17, 2024
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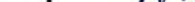
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VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	VISUAL ARTIST			UPAD
	SING			
	READING			
	DANCE			

SIGNATURE		DATE	JULY 17, 2024
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<p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person who has immediate supervision over you in the 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> <hr/> <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</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>PETER FRANCIS D. SANTOS</td> <td>UNIVERSITY TOWN CATARMAN N. SAMAR</td> <td>N/A</td> </tr> <tr> <td>ANELITA M. OBRAR</td> <td>UNIVERSITY TOWN CATARMAN N. SAMAR</td> <td>N/A</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	PETER FRANCIS D. SANTOS	UNIVERSITY TOWN CATARMAN N. SAMAR	N/A	ANELITA M. OBRAR	UNIVERSITY TOWN CATARMAN N. SAMAR	N/A			
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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>													
<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> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Government Issued ID:</td> <td>N/A</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>N/A</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>N/A</td> </tr> </table>	Government Issued ID:	N/A	ID/License/Passport No.:	N/A	Date/Place of Issuance:	N/A	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; height: 50px;">  </td> </tr> <tr> <td style="text-align: center;"> <p>Signature (Sign inside the box)</p> <p>JULY 13, 2024</p> <p>Date Accomplished</p> </td> </tr> </table>		<p>Signature (Sign inside the box)</p> <p>JULY 13, 2024</p> <p>Date Accomplished</p>				
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<p>Signature (Sign inside the box)</p> <p>JULY 13, 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: 50px; margin: 10px auto; text-align: center;"> <p>Person Administering Oath</p> </div>													



NEBRIDA LEBLANQUE C.

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