## 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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FOR<u>M</u>. 1. CS ID No. (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes ( ) 🔲 use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE 2. SURNAME CATACUTAN NAME EXTENSION (JR., SR) FIRST NAME IRISH MIDDLE NAME **NECIO** 3. DATE OF BIRTH 4/1/1998 16. CITIZENSHIP ☑ Filipino ☐ Dual Citizenship (mm/dd/yyyy) □ by birth □ by naturalization 4. PLACE OF BIRTH **BAYBAY CITY, LEYTE** If holder of dual citizenship. Pls. indicate country: please indicate the details. 5. SEX ☑ Male □ Female ZONE 5 ☑ Sinale ☐ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot N □ Widowed □ Separated COGON N/A ☐ Other/s: Subdivision/Village Barangay BAYBAY CITY LEYTE 7. HEIGHT (m) 1.65m City/Municipality Province 8. WEIGHT (kg) 71kg ZIP CODE 6521 N/A ZONE 5 18. PERMANENT ADDRESS 9. BLOOD TYPE 0 House/Block/Lot N N/A COGON 10. GSIS ID NO. N/A Barangay **BAYBAY CITY LEYTE** 11. PAG-IBIG ID NO. 121270291749 Citv/Municipality Province 12. PHILHEALTH NO N/A ZIP CODE 6521 13. SSS NO. N/A 19. TELEPHONE NO. N/A 14. TIN NO. 723-427-551 20. MOBILE NO. 09187375442 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) irishcatacutan98@gmail.com I. FAMILY BACKGROUND 23. NAME of CHILDREN (Write full name and list all) N/A 22. SPOUSE'S SURNAME DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME N/A MIDDLE NAME N/A N/A N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A N/A **BUSINESS ADDRESS** N/A N/A TELEPHONE NO. N/A N/A CATACUTAN FATHER'S SURNAME N/A N/A **BERNIE** N/A FIRST NAME MIDDLE NAME TORRES N/A 25. MOTHER'S MAIDEN NAME N/A **NECIO** N/A SURNAME FIRST NAME **ANGELINA** N/A MIDDLE NAME **OMEGA** (Continue on separate sheet if necessary) EDUCATIONAL BACKGROUND SCHOLARSHIP/ 26. PERIOD OF ATTENDANCE HIGHEST LEVEL/ NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE ACADEMIC LEVEL UNITS EARNED GRADUATED (Write in full) (Write in full) HONORS (if not graduated) RECEIVED From То BAYBAY I CENTRAL SCHOOL PRIMARY EDUCATION N/A ELEMENTARY 2010 N/A 2004 2010 SECONDARY **BAYBAY NATIONAL HIGH SCHOOL** HIGH SCHOOL N/A 2010 2014 2014 VOCATIONAL / PALERMO HOTEL INSTITUTE OF TOURISM AND FOOD AND BEVERAGE SERVICES 2019 2019 N/A 2019 N/A TRADE COURSE HOSPITALITY, INC. BACHELOR OF SECONDARY EDUCATION VISAYAS STATE UNIVERSITY COLLEGE N/A 2018 N/A 2014 2018 MAJOR IN MAPEH **GRADUATE STUDIES** N/A N/A N/A N/A N/A N/A SIGNATURE DATE February 12, 2023

IV. CIVIL SERVICE ELIGIBILITY										
			RATING (If Applicable)	DATE OF EXAMINATION / PLACE OF EXAMINATION / CONFERMENT CONFERMENT			RMENT	NUMBER	Date of Validity	
			83.4	SEP. 30, 2018	TACLOBAN CITY			1706069	1/4/2022	
	N/A	4	N/A	N/A	N/A			N/A	l	
	N/A	<b>A</b>	N/A	N/A	N/A			N/A		
	N/A			N/A N/A				N/A		
N/A			N/A	N/A	N/A			N/A		
	N/A			N/A	N/A			N/A		
	N/A			N/A	N/A			N/A		
			·	N/A						
	XPERIENCE	nt. Start from your recent	work) Description	a of dution about dis	indicated in the attaches	I Mark Evas	vianaa ahaat			
28. INCLU	JSIVE DATES m/dd/yyyy)	POSITION TI	TLE	DEPARTMENT / AGE	ENCY / OFFICE / COMPANY (Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE	
From	То				·		NCREMENT		(Y/ N)	
8/1/2019	12/13/2019	PART-TIME INST			HUMAN KINETICS	N/A	N/A	SEMESTRAL	N/A	
1/20/2020	5/22/2020	PART-TIME INST		INSTITUTE OF HUMAN KINETICS		N/A	N/A	SEMESTRAL	N/A	
08/13/2020	7/23/2021	PART-TIME INST		INSTITUTE OF HUMAN KINETICS		N/A	N/A	SEMESTRAL	N/A	
7/23/2021	1/28/2022	PART-TIME INST		INSTITUTE OF HUMAN KINETICS		N/A	N/A	SEMESTRAL	N/A	
1/28/2022	PRESENT	PART-TIME INST	RUCTOR	INSTITUTE OF HUMAN KINETICS		N/A	N/A	SEMESTRAL	N/A	
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A	
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A	
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A	
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A	
N/A		I/A N/A		N/A		N/A	N/A	N/A	N/A	
N/A	N/A	N/A		N/A N/A		N/A	N/A	N/A	N/A	
N/A	N/A	N/A			N/A	N/A	N/A	N/A		
N/A N/A	N/A	N/A			N/A N/A	N/A	N/A	N/A		
N/A N/A	N/A		N/A		N/A N/A		N/A	N/A	N/A	
N/A N/A	N/A				N/A	N/A	N/A	N/A		
N/A N/A	N/A N/A	N/A		N/A N/A		N/A N/A	N/A N/A	N/A N/A	N/A N/A	
N/A	N/A N/A	N/A N/A			N/A N/A	N/A N/A	N/A N/A	N/A		
N/A	N/A	N/A N/A		N/A N/A		N/A	N/A	N/A	N/A	
N/A	N/A	N/A N/A		N/A		N/A	N/A	N/A	N/A	
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A	
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A	
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A	
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A	
N/A	N/A N/A		N/A		N/A	N/A	N/A	N/A		
N/A	N/A			N/A		N/A	N/A	N/A	N/A	
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A	
N/A	N/A	N/A		N/A		N/A	N/A	N/A	N/A	
CICNATURE		(Cont		inue on separate sheet if necessary)		February 12, 202		022		
SIGNATURE		(Strat w/m)			DATE		repruary 12, 2	023 S EOPM 212 (Pavisad 2)		

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF OR (Write in full)	GANIZATION	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK		
	From	То					
MAPEH CLUB		4/6/2015	7/6/2016	N/A		AUDITOR	
MAPEH CLUB		7/6/2016	10/6/2017	N/A		SECRETARY	
BAYBAY YOUTH LEADERS	COUNCIL	7/6/2017	9/6/2018	N/A		P.I.O.	
SK FEDERATION- BAYBAY C	TY CHAPTER	1/6/2018	PRESENT	N/A	SECRETARY		
INSTITUTE OF HUMAN K	INETICS	8/5/2019	05/22/2020	N/A	SECRETARY		
N/A		N/A	N/A	N/A	N/A		
N/A			N/A	N/A	N/A		
VII. LEARNING AND DEVELOPMENT (L&D) I		n separate sheet if ROGRAMS AT					
(Start from the most recent L&D/training program and include	only the relevant L&D/training taken for the			xecutive/Manageria			
30. TITLE OF LEARNING AND DEVELOPMENT INTER (Write in full)	EVENTIONS/TRAINING PROGRAMS	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
OUTCOMES-BASED TEACHING AND LEARN	ING SYLLABUS WORKSHOP	1/31/2020	To 1/31/2020	8 HRS	TECHNICAL	INSTITUTE OF HUMAN KINETICS	
WORKSHOP ON CRAFTING THE SYLLABI FO	R THE NEW BCAEd COURSES	10/8/2020	10/8/2020	8 HRS	TECHNICAL	VISAYAS STATE UNIVERSITY	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A	N/A	N/A	N/A	N/A	
N/A		N/A N/A	N/A	N/A	N/A	N/A	
N/A			N/A necessary)	N/A	N/A	N/A	
VIII. OTHER INFORMATION	Committee	-p = 0.0 01100t II 1	w <sub>J</sub> /				
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
SWIMMING MEN ASST. COACH		N/A					
DESIGNING			N/A			N/A	
LETTERING		N/A		N/A			
DANCING		N/A				N/A	
COMPUTER LITERATE					N/A		
N/A					N/A		
N/A	N/A (Continue on separate sheet if necessary)					N/A	
SIGNATURE	(Continue on separate sheet if necessary)			DA	DATE February 12, 2023  CS FORM 212 (Revised 2017), Page		

34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed,						
	a. within the third degree?	☐ YES [	☑ NO				
	b. within the fourth degree (for Local Government Unit - Care	eer Employees)?	□ YES [	☑ NO			
			If YES, give details	S:			
			-				
35.	a. Have you ever been found guilty of any administrative offe	nse?		☑ NO			
			If YES, give details	S:			
	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 an	☐ YES	☑ NO				
	by any court or tribunal?		If YES, give details	S:			
			-				
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, en-		☐ YES ☑ NO If YES, give details:				
	out (abolition) in the public or private sector?	- · · · · · · · · · · · · · · · · · · ·	— give details	J.			
38.	a. Have you ever been a candidate in a national or local elec	tion held within the last year (except	☐ YES	☑ NO			
	Barangay election)?		If YES, give details:				
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local of		☐ YES ☑ NO				
20	Have you acquired the status of an immigrant or permanent		If YES, give detail				
39.	mave you acquired the status of all illingrant or permanent	resident of another country!	☐ YES  If YES, give detail:				
				o (oodinay).			
40.	· · · · · · · · · · · · · ·	·					
a.	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), Are you a member of any indigenous group?	please answer the following items:					
<b>.</b>	Are you a member of any margenous group:		☐ YES ☑ NO If YES, please specify:				
b.	Are you a person with disability?		☐ YES ☑ NO				
C.	Are you a solo parent?		If YES, please specify ID No:  ☐ YES ☑ NO				
	, ,	If YES, please specify ID No:					
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /a	ppointee)		September 1			
	NAME	ADDRESS	TEL. NO.				
	PROF. MARY JEAN SAPAN	VSU, BAYBAY, CITY LEYTE	9423679323	JE			
	HON. MARK MICHAEL UNLU-CAY	BAYBAY CITY, LEYTE	9355146106				
42.	I declare under oath that I have personally accomplished	this Personal Data Sheet which is a tri	ue correct and				
	complete statement pursuant to the provisions of pertine	nt laws, rules and regulations of the F	Republic of the				
	Philippines. I authorize the agency head/authorized repre I agree that any misrepresentation made in this docu						
	administrative/criminal case/s against me.		5 a.5g 5.				
	Numerous I Day of ID						
	Covernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance		/				
G	overnment Issued ID: PRC						
IC	D/License/Passport No.: 1706069	x)					
D	rate/Place of Issuance: TACLOBAN CITY, JANUARY 2019	February 12, 2023  Date Accomplished		Right Thumbmark			
1 адах таптан							
	SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.						
	L	Person Administering Oatl	1				