

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	GALAGALA		
FIRST NAME	MARK RONAR		NAME EXTENSION (JR., SR)
MIDDLE NAME	GALAGALA		
3. DATE OF BIRTH (mm/dd/yyyy)	4 02 1994	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	JAGNA, BOHOL	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input 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)	1.65	17. RESIDENTIAL ADDRESS	PUROK 3 House/Block/Lot No. Street LARAPAN Subdivision/Village Barangay JAGNA BOHOL City/Municipality Province
8. WEIGHT (kg)	50	ZIP CODE	6308
9. BLOOD TYPE	AB+	18. PERMANENT ADDRESS	PUROK 3 House/Block/Lot No. Street LARAPAN Subdivision/Village Barangay JAGNA BOHOL City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6308
11. PAG-BIG ID NO.	1211-4665-4922	19. TELEPHONE NO.	N/A
12. PHILHEALTH NO.	15-050401518-3	20. MOBILE NO.	09996670148/09978029102
13. SSS NO.	08-2560716-7	21. E-MAIL ADDRESS (if any)	markusalejandro2015@gmail.com
14. TIN NO.	321-804-084-0000		
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		N/A	
OCCUPATION	N/A		N/A	
EMPLOYER/BUSINESS NAME	N/A		N/A	
BUSINESS ADDRESS	N/A		N/A	
TELEPHONE NO.	N/A		N/A	
24. FATHER'S SURNAME	GALAGALA			
FIRST NAME	AVELINO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	ACEDO			
25. MOTHER'S MAIDEN NAME				
SURNAME	GALAGALA			
FIRST NAME	TITA			
MIDDLE NAME	ACILO			

(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	LARAPAN ELEMENTARY SCHOOL		8 06 2000	31 03 2006		2006	
SECONDARY	BOHOL INSTITUTE OF TECHNOLOGY		8 06 2006	31 03 2010		2010	
COLLEGE	LOURDES COLLEGE	BACHELOR OF LIBRARY AND INFORMATION SCIENCE	8 06 2010	25 03 2015		2015	
GRADUATE STUDIES	LOURDES COLLEGE	MASTER OF LIBRARY AND INFORMATION SCIENCE	10 10 2015	25 03 2018		2018	CHED Sch.
GRADUATE STUDIES	UNIVERSITY OF CEBU	DOCTOR OF BUSINESS ADMINISTRATION	on-going				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	May 5, 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.

[illegible]

SIGNATURE		DATE		May 5, 5021
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<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> <hr/> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">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: _____</p> <p style="text-align: right;">Resignation (Lourdes College) _____</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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>ANN JERICA SIOJO, RL, MLIS</td> <td>CAGAYAN DE ORO CITY</td> <td>9177063758</td> </tr> <tr> <td>MELODY RETAZO, Ph.D.</td> <td>CAGAYAN DE ORO CITY</td> <td>9270172382</td> </tr> <tr> <td>GLEROSE T. MILLANA, MBA, CHP</td> <td>SURIGAO CITY</td> <td>9091251640</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	ANN JERICA SIOJO, RL, MLIS	CAGAYAN DE ORO CITY	9177063758	MELODY RETAZO, Ph.D.	CAGAYAN DE ORO CITY	9270172382	GLEROSE T. MILLANA, MBA, CHP	SURIGAO CITY	9091251640
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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>													



PHOTO