

# 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. CSID No.

(Do not fill up. For CSC use only)

## I. PERSONAL INFORMATION

SURNAME	Batidor			
FIRST NAME	Eve	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Boja			
3. DATE OF BIRTH (mm/dd/yyyy)	9/8/00	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:	
4. PLACE OF BIRTH	Mat-E, Merida, Leyte	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	
5. SEX				
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		
7. HEIGHT (m)	1.49	ZIP CODE	House/Block/Lot No. Street Mat-E Subdivision/Village Barangay Merida Leyte City/Municipality Province	
8. WEIGHT (kg)	55		6540	
9. BLOOD TYPE	b+		18. PERMANENT ADDRESS	House/Block/Lot No. Street Mat-E Subdivision/Village Barangay Merida Leyte City/Municipality Province
10. GSIS ID NO.	N/A			6540
11. PAG-IBIG ID NO.	121312048947			
12. PHILHEALTH NO.	130255837169			
13. SSS NO.	06-4479713-5	19. TELEPHONE NO.	N/A	
14. TIN NO.	604-655-785	20. MOBILE NO.	09466000366	
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	<a href="mailto:batidoreve8@gmail.com">batidoreve8@gmail.com</a>	

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	Batidor			7/11/67
FIRST NAME	Reynante	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Estrera			
25. MOTHER'S MAIDEN NAME				
SURNAME	Boja			12/19/1968
FIRST NAME	Elinita			
MIDDLE NAME	Panares		(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	Calunasan Elementary School					2006-2012	With Honor
SECONDARY	Merida Vocational School					2012-2016	With Honor
SENIOR HIGH SCHOOL	Ormoc City Senior High School					2016-2018	With Honor
COLLEGE	Visayas State University	Bachelor of Science in Agriculture				2018-2022	Cum Laude
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	06/27/25
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#### IV. CIVIL SERVICE ELIGIBILITY

27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE ELIGIBILITY / DRIVER'S LICENSE BARANGAY	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	Civil Service Eligibility	None	None	Tacloban City, Leyte	100108221741	12/28/2022
	Driver's License	None	October 2024	Baybay City, Leyte	H12-24-003641	10/24/2024
	Licensure Examination for Agriculture	86%	November 2024	Tacloban City, Leyte	0047163	7/3/25

(Continue on separate sheet if necessary)

## V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

**SIGNATURE**

DATE \_\_\_\_\_

06/27/25

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

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		

(Continue on separate sheet if necessary)

**VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED**

30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	Summer Practicum Skills Development	6/1/19	7/1/19	240 hrs	Student	Visayas State University
	Agro-Enterprise Clustering Approach workshop F2C2 program	10/18/22	10/26/22	32 hrs	Association Member	Department of Agriculture Region 8
	Role of Supervisor in Management	11/20/23	11/20/23	8 hrs	Supervisor	Del Monte Philippines Inc.
	Winning the Race Against Time	6/5/23	6/5/23	8 hrs	Supervisor	Del Monte Philippines Inc.
	Effective Written Communication	6/26/23	7/3/23	16 hrs	Supervisor	Del Monte Philippines Inc.
	Problem Solving and Decision Making	7/17/23	7/31/23	24 hrs	Supervisor	Del Monte Philippines Inc.
	Leading Coach-Like Conversation	8/10/23	8/10/23	4 hrs	Supervisor	Del Monte Philippines Inc.
	Managing Organization Change	9/20/23	9/20/23	16 hrs	Supervisor	Del Monte Philippines Inc.
	Effective Presentation Skills	11/20/23	11/20/23	16 hrs	Supervisor	Del Monte Philippines Inc.
	Farm and Fisheries Clustering and Consolidation (F2C2) Business Forum	11/22/24	11/22/24	8 hrs	Representative	Department of Agriculture Region 8
	Organic Agriculture Production NCII	2/6/25	1/7/25	202 hrs	Student	Living Paradise Farm-TESDA


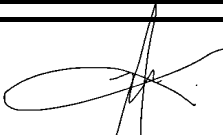
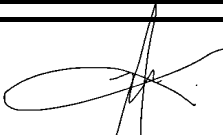
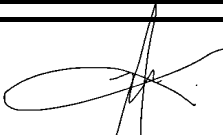
(Continue on separate sheet if necessary)

**VIII. OTHER INFORMATION**

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Into Field Works				Mat-E Farmers Association
	Into Gardening				
	Into Outdoor Activities				
	Mountain Climbing				
	Free Diving				
	Crocheting				

(Continue on separate sheet if necessary)

<b>SIGNATURE</b>		<b>DATE</b>	06/27/25
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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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details: _____</p> <hr/> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details: _____</p> <p style="margin-left: 40px;">Date Filed: _____</p> <p style="margin-left: 40px;">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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input type="checkbox"/> NO </div> <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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details: _____</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, give details: _____</p>															
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <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>	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, please specify: _____</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <p>If YES, please specify ID No: _____</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <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: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>John Michael Lajera</td> <td>Brgy. Tagiban Manolo Fortich Bukidnon</td> <td>09917724511</td> </tr> <tr> <td>Neil Charlie Ladao</td> <td>Brgy. Tagoloan, Cagayan De Oro City</td> <td>09918470959</td> </tr> <tr> <td>Julito Ranido Jr.</td> <td>Brgy Can-ayan Malaybalay City</td> <td>09171495874</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	John Michael Lajera	Brgy. Tagiban Manolo Fortich Bukidnon	09917724511	Neil Charlie Ladao	Brgy. Tagoloan, Cagayan De Oro City	09918470959	Julito Ranido Jr.	Brgy Can-ayan Malaybalay City	09171495874	 <b>EVE B. BATIDOR</b> PHOTO		
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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>		<div style="border: 1px solid black; width: 150px; height: 100px; margin: 0 auto;"></div> <p>Right Thumbmark</p>														
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td colspan="2"><i>PLEASE INDICATE ID Number and Date of Issuance</i></td> </tr> <tr> <td>Government Issued ID:</td> <td>Passport ID</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>P1677951C</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>09/14/2022 Tacloban City</td> </tr> </table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)		<i>PLEASE INDICATE ID Number and Date of Issuance</i>		Government Issued ID:	Passport ID	ID/License/Passport No.:	P1677951C	Date/Place of Issuance:	09/14/2022 Tacloban City	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">                   Signature (Sign inside the box)             </td> <td style="width: 50%;"></td> </tr> <tr> <td style="text-align: center;"> <div style="border: 1px solid black; width: 30px; height: 15px; display: inline-block;"></div>                 Date Accomplished             </td> <td></td> </tr> </table>		 Signature (Sign inside the box)		<div style="border: 1px solid black; width: 30px; height: 15px; display: inline-block;"></div> Date Accomplished	
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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: 250px; height: 60px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>																