

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	MANGACCAT		
FIRST NAME	RYAN CAMILLUS	NAME EXTENSION (JR., SR)	
MIDDLE NAME	PFLEIDER		
3. DATE OF BIRTH (mm/dd/yyyy)	7/25/1987	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	TACLOBAN CITY	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:	17. RESIDENTIAL ADDRESS	310 3RD House/Block/Lot No. Street SAMPAGUITA 59-A Subdivision/Village Barangay TACLOBAN LEYTE City/Municipality Province
7. HEIGHT (m)	160	ZIP CODE	6500
8. WEIGHT (kg)	50	18. PERMANENT ADDRESS	310 3RD House/Block/Lot No. Street SAMPAGUITA 59-A Subdivision/Village Barangay TACLOBAN LEYTE City/Municipality Province
9. BLOOD TYPE	A	ZIP CODE	6500
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	
11. PAG-IBIG ID NO.	1210-2965-1457	20. MOBILE NO.	09171379256
12. PHILHEALTH NO.	01-051616545-1	21. E-MAIL ADDRESS (if any)	rpmangacat@yahoo.com
13. SSS NO.	06-3199235-4		
14. TIN NO.	402-774-074		
15. AGENCY EMPLOYEE NO.	N/A		

II. FAMILY BACKGROUND

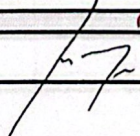
22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	ROBERTO JOSE CINCO MANGACCAT	7/13/2015
MIDDLE NAME	N/A		ROMULUS CONIN CINCO MANGACCAT	6/19/2021
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	MANGACCAT			
FIRST NAME	ROBERT	NAME EXTENSION (JR., SR)		
MIDDLE NAME	MAMARIL			
25. MOTHER'S MAIDEN NAME				
SURNAME	PFLEIDER			
FIRST NAME	CONCEPCION			
MIDDLE NAME	ARANTE			

(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	ST. THERESE CHILD DEVELOPMENT CENTER		1994	2000		2000	N/A
SECONDARY	HOLY VIRGIN SCHOOL OF SALVACION INC.		2002	2004		2004	N/A
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	ST. PAUL SCHOOL OF BUSINESS AND LAW	BACHELOR OF SCIENCE IN COMMERCE	2008	2011		2011	N/A
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	09-20-25
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[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE	<i>[Signature]</i>	DATE	09-20-25
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CS FORM 212 (Revised 2017), Page 2 of 4

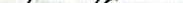
[illegible]

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

[illegible]

VIII. OTHER INFORMATION

[illegible]

SIGNATURE		DATE	09-20-25
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09-20-25

<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 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 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>Atty. Kim David M. Obejas</td> <td>Tacloban City</td> <td>09165574920</td> </tr> <tr> <td>SINSP Reeven Ryan C. Bolito</td> <td>Quezon City</td> <td>09273095793</td> </tr> <tr> <td>Engr. Rafael Teosar C. Redubla</td> <td>Tacloban City</td> <td>09278991053</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Atty. Kim David M. Obejas	Tacloban City	09165574920	SINSP Reeven Ryan C. Bolito	Quezon City	09273095793	Engr. Rafael Teosar C. Redubla	Tacloban City	09278991053
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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; text-align: center; padding-top: 10px;"> Person Administering Oath </div>													