

## PERSONAL DATA SHEET

WARNING: Any misinterpretation 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	AVELLANA		
FIRST NAME	ARLEE JEN	NAME EXTENSION (JR., SR)	
MIDDLE NAME	CAPA		
3. DATE OF BIRTH (mm/dd/yyyy)	11/18/97	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization
4. PLACE OF BIRTH	BAYBAY, LEYTE	If holder of dual citizenship, please indicate the details.	Pls. indicate country:
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Separated  <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	<b>SAN MIGUEL</b> <i>House/Block/Lot No.</i> <i>Street</i> <b>POBLACION</b> <i>Subdivision/Village</i> <i>Barangay</i> <b>MAHAPLAG</b> <b>LEYTE</b> <i>City/Municipality</i> <i>Province</i> <b>6512</b>
7. HEIGHT (m)	1.53	ZIP CODE	<b>SAN MIGUEL</b> <i>House/Block/Lot No.</i> <i>Street</i> <b>POBLACION</b> <i>Subdivision/Village</i> <i>Barangay</i> <b>MAHAPLAG</b> <b>LEYTE</b> <i>City/Municipality</i> <i>Province</i> <b>6512</b>
8. WEIGHT (kg)	52		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	<b>SAN MIGUEL</b> <i>House/Block/Lot No.</i> <i>Street</i> <b>POBLACION</b> <i>Subdivision/Village</i> <i>Barangay</i> <b>MAHAPLAG</b> <b>LEYTE</b> <i>City/Municipality</i> <i>Province</i> <b>6512</b>
10. GSIS ID NO.	N/A	ZIP CODE	
11. PAG-IBIG ID NO.	121243674306		
12. PHILHEALTH NO.	132506599796		
13. SSS NO.	3514512094	19. TELEPHONE NO.	N/A
14. TIN NO.	354144141-0000	20. MOBILE NO.	09654882261
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	arleejenc.avellana@gmail.com

## 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		NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	AVELLANA			
FIRST NAME	EDGARDO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	SUAREZ			
25. MOTHER'S MAIDEN NAME	JOSEPHINE SUGABO CAPA			
SURNAME	AVELLANA			
FIRST NAME	JOSEPHINE			
MIDDLE NAME	CAPA		(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	MAHAPLAG CENTRAL SCHOOL	PRIMARY EDUCATION	2004	2010	GRADUATED	2010	WITH HONORS
SECONDARY	MAHAPLAG NATIONAL HIGH SCHOOL	HIGH SCHOOL	2010	2014	GRADUATED	2014	WITH HONORS
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY EDUCATION	2014	2018	GRADUATED	2018	CUM LAUDE
GRADUATE STUDIES	SOUTHERN LEYTE STATE UNIVERSITY	MASTER OF ARTS IN TEACHING MAJOR IN MATHEMATICS	2019	PRESENT	39	N/A	N/A

(Continue on separate sheet if necessary)

[illegible]

## V. WORK EXPERIENCE

[illegible]

<b>SIGNATURE</b>		<b>DATE</b>	JULY 18, 2022	CS FORM 212 (Revised 2017), Page 2 of 4
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**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		
	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

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

(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)

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			
	TRAINING-WORKSHOP ON ASSESSMENT IN HIGHER EDUCATION: CREATION OF TABLE OF SPECIFICATIONS (TOS)	11/25/21	11/25/21	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	VSU E-Learning Environment Training Workshop	12/7/20	12/7/20	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	WEBINAR ON FLEXIBLE LEARNING MODALITIES AND TECHNIQUES	7/4/20	7/4/20	3.0	TECHNICAL	EVHEI-FLMSC
	ONLINE TRAINING ON DEVELOPING A MOODLE ONLINE CLASSROOM	6/24/20	6/26/20	24.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	GOOGLE CLASSROOM WORKSHOP	12/12/19	12/13/19	16	TECHNICAL	VISAYAS STATE UNIVERSITY
	LEARNER CENTERED PERSPECTIVES IN THE TEACHING OF MATHEMATICS IN THE MODERN WORLD	5/18/19	5/18/19	8	TECHNICAL	THE MATHEMATICS TEACHERS ASSOCIATION OF THE PHILIPPINES TEARTIARY LEVEL, INC.
	10 DAYS BASIC COMPUTER LITERACY TRAINING	1/21/19	2/1/19	80	TECHNICAL	JE MONDEJAR COMPUTER COLLEGE

(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)
	BAKING		N/A		MATHEMATICS TEACHERS ASSOCIATION OF THE PHILIPPINES - TERTIARY LEVEL
	PROFICIENT IN MICROSOFT OFFICE				
	GOOD COMMUNICATION SKILLS				

(Continue on separate sheet if necessary)

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,

a. within the third degree?

b. within the fourth degree (for Local Government Unit - Career Employees)?

☐ YES ☒ NO

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

35. a. Have you ever been found guilty of any administrative offense?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

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 any law, decree, ordinance or regulation by any court or tribunal?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

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?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

COMPANY WAS ON CLOSURE FROM PRIVATE SECTOR

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

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?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES ☒ NO

If YES, give details (country): \_\_\_\_\_

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:

a. Are you a member of any indigenous group?

☐ YES ☒ NO

If YES, please specify: \_\_\_\_\_

b. Are you a person with disability?

☐ YES ☒ NO

If YES, please specify ID No: \_\_\_\_\_

c. Are you a solo parent?

☐ YES ☒ NO

If YES, please specify ID No: \_\_\_\_\_

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
HELMAR G. YCONG	CARIDAD, BAYBAY CITY, LEYTE	9275424182
BAYRON S. BARREDO	VISCA, BAYBAY CITY, LEYTE	9515112133
MARZ PAULINE BANDALAN-SALAZAR	VISCA, BAYBAY CITY, LEYTE	9108780538

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.



Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) **PLEASE INDICATE ID Number and Date of**

Government Issued ID: **PRC**

ID/License/Passport No.: **1690353**

Date/Place of Issuance: **12/27/2018/ORMOC, CITY**

*[Signature]*

Signature (Sign inside the box)

**JULY 18, 2022**

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath