

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	BORBON		
FIRST NAME	AIKA MAE	NAME EXTENSION (JR, SR) N/A	
MIDDLE NAME	GABIETA		
3. DATE OF BIRTH (mm/dd/yyyy)	06/20/1995	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, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" 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	BLOCK 6, LOT 10, PHASE 3 MANGGA STREET House/Block/Lot No Street V&G SUBDIVISION BRGY 109 Subdivision/Village Barangay TACLOBAN CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.55 m	ZIP CODE	6500
8. WEIGHT (kg)	54 kg	18. PERMANENT ADDRESS	BLOCK 6, LOT 10, PHASE 3 MANGGA STREET House/Block/Lot No Street V&G SUBDIVISION BRGY 109 Subdivision/Village Barangay TACLOBAN CITY LEYTE City/Municipality Province
9. BLOOD TYPE	A+	ZIP CODE	6500
10. GSIS ID NO.	2005130242	19. TELEPHONE NO.	(053) 832 8663
11. PAG-IBIG ID NO.	1211-9368-6367	20. MOBILE NO.	0909-591-4822
12. PHILHEALTH NO.	13-000122346-2	21. E-MAIL ADDRESS (if any)	aikaborbon728@gmail.com
13. SSS NO.	NONE		
14. TIN NO.	336-021-879		
15. AGENCY EMPLOYEE NO.	2017-6733314		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	NONE		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR, SR)	NONE	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	BORBON			
FIRST NAME	ALEJANDRO	NAME EXTENSION (JR, SR) N/A		
MIDDLE NAME	NORA			
25. MOTHER'S MAIDEN NAME				
SURNAME	GABIETA			
FIRST NAME	MARILYN			
MIDDLE NAME	BRAZAS			

(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	TACLOBAN ANGELICUM LEARNING CENTER	ELEMENTARY	2001	2007	N/A	2007	PROFICIENCY Awardee
SECONDARY	TACLOBAN ANGELICUM LEARNING CENTER	HIGH SCHOOL	2007	2011	N/A	2011	WITH HONORS
VOCATIONAL / TRADE COURSE	NONE	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	UNIVERSITY OF THE PHILIPPINES VISAYAS	BACHELOR OF ARTS (PSYCHOLOGY)	2011	2015	N/A	2015	COLLEGE SCHOLAR
GRADUATE STUDIES	ST SCHOLASTICA'S COLLEGE MANILA	MASTER OF ARTS IN PSYCHOLOGY	2017	DATE	42 UNITS	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	03/14/2024
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27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	RA 1080 (REGISTERED PSYCHOMETRICIAN)	81.20%	August 30-31, 2016	COMMISSION ON AUDIT RO VII, CEBU CITY	0008128	06/20/2024
	CAREER SERVICE PROFESSIONAL	83.07%	October 25, 2015	LEYTE NORMAL UNIVERSITY, TACLOBAN CITY	N/A	N/A

V. WORK EXPERIENCE
(Include private employment. Start from your recent work.) Description of duties should be indicated in the attached Work Experience sheet.

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(Continue on separate sheet if necessary)

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03/14/2024

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		
	NEW LIFE TACLOBAN, MARASBARAS, TACLOBAN CITY	04/04/2014	DATE	N/A	CHILDREN'S MINISTRY VOLUNTEER

(Continue on separate sheet if necessary)

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

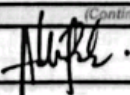
30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	Online Training Program for Administration and Facilitators of Intensive Treatment and Rehabilitation Program for Residential Treatment and Rehabilitation Centers for Drug Dependents (INTREPRET)	01/24/2023	02/01/2023	56	TECHNICAL	Department of Health in partnership with Japan International Cooperation Agency (JICA)
	Addressing Mental Health Problems Through Motivational Interviewing	11/27/2022	1/27/2022	10	TECHNICAL	Cognescere Psychological Services
	Orientation on the Mental Health Act (RA 11036)	08/18/2022	08/18/2022	4	TECHNICAL	National Center for Mental Health - Professional Education, Training and Research Office
	Developing and Implementing a Mental Health Program in Organizations	06/26/2021	06/27/2021	18	TECHNICAL	Cognescere Psychological Services
	Training on Motivational Interviewing for Coaches and Training on Coaching and Supervision	05/05/2021	06/15/2021	36	TECHNICAL	USAID RenewHealth
	Training Program for DOH-Accreditation for Rehabilitation Practitioners on Drug Dependence Screening, Assessment and Management	11/18/2019	11/29/2019	80	TECHNICAL	Department of Health - Treatment and Rehabilitation Center, Dulag, Leyte
	Basic Records Management Training and Workshop	11/13/2019	11/15/2019	24	TECHNICAL	Department of Health - Treatment and Rehabilitation Center, Dulag, Leyte
	Basic News Writing Training and Workshop	10/23/2019	10/25/2019	24	TECHNICAL	Department of Health - Treatment and Rehabilitation Center, Dulag, Leyte
	Curriculum 1: Developing a Community-Based Recovery Support System	08/19/2019	08/23/2019	40	TECHNICAL	JJ Valderama Behavioral Management Center, Davao City
	Integrated Interpersonal Communication and Counselling for Hospital Service Provider Training	08/13/2019	08/16/2019	32	TECHNICAL	DOH Eastern Visayas Center for Health and Development
	Basic Eye Movement Desensitization and Reprocessing (EMDR) Protocols and Approaches in Psychotherapy	02/02/2019	02/04/2019	24	TECHNICAL	Eye Movement Desensitization and Reprocessing Philippines
	Understanding Formal Assessment and Training on the Administration, Scoring and Interpretation of Psychological Tests	07/24/2017	07/24/2017	8	TECHNICAL	Psych Systems and Innovation, Inc., Pasig City, Manila
	Psychological Association of the Philippines Professional Summit	05/25/2017	05/26/2017	16	TECHNICAL	Psychological Association of the Philippines, Dumaguete City
	Therapeutic Community Simulation Training	05/08/2017	05/12/2017	40	TECHNICAL	Department of Health - Treatment and Rehabilitation Center, Dulag, Leyte
	Training on Alcohol, Smoking, Substance Abuse Involvement Screening Test - Brief Intervention (ASSIST-BI)	02/01/2017	02/01/2017	8	TECHNICAL	Department of Health - Treatment and Rehabilitation Center, Dulag, Leyte

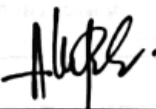
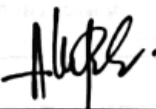
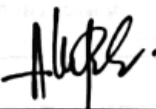






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VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Calligraphy		NONE		PSYCHOLOGICAL ASSOCIATION OF THE PHILIPPINES (PAP)
	Basic editing and layouting				TRC DULAG EMPLOYEES' ASSOCIATION (TDEA)
	Teaching biblically-inclined lessons to children				
	Emcee in various programs				
	Hiking				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	03/14/2024
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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)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details:												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details:												
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details:												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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? b. Are you a person with disability? c. Are you a solo parent?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No:												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)													
<table><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>FRANCIS BRIAN S. PALENCIA, RPr</td><td>DOH-TRC DULAG</td><td>09566534199</td></tr><tr><td>ULLASINI J. PANGAN-ALFEREZ, RN</td><td>NEW LIFE TACLOBAN</td><td>09061650870</td></tr><tr><td>JULIDYN P. BERNIDO, RCh</td><td>UNIVERSITY OF SOUTHERN PHILIPPINES</td><td>09054933080</td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	FRANCIS BRIAN S. PALENCIA, RPr	DOH-TRC DULAG	09566534199	ULLASINI J. PANGAN-ALFEREZ, RN	NEW LIFE TACLOBAN	09061650870	JULIDYN P. BERNIDO, RCh	UNIVERSITY OF SOUTHERN PHILIPPINES	09054933080
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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.													
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SUBSCRIBED AND SWORN to before me this _____													
Atty. MAUREEN CHARRISSE A. MALTOS Notary Public until December 31, 2025 For Palo, Leyte and Province of Leyte Notarial Commission No. 2024-01-22 Roll No. 79877 May 18, 2022 IBP OR No. 369816 11/22/2023; Leyte Chapter PTR No. PL 8879306, 01/02/2024; Palo, Leyte MCLE Exemption No. VLEB-P002507 Zone Aries, Brgy. Pawing, Palo, Leyte													