

PERSONAL DATA SHEET

WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal cases 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. T. CSID No. (Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	VIRAY		NAME EXTENSION (JR., SR.)
FIRST NAME	MIA GRACE		
MIDDLE NAME	EDUARDO		
3. DATE OF BIRTH (mm/dd/yyyy)	03/30/1996	16. CITIZENSHIP	☒ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization P/s. indicate country:
4. PLACE OF BIRTH	BACON CITY	If holder of dual citizenship, please indicate the details.	
5. SEX	☐ Male ☒ Female		
6. CIVIL STATUS	☒ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. ZONE M Street TANUHA Subdivision/Village Barangay TOLOSA LEYTE City/Municipality Province
7. HEIGHT (in)	1.575	18. PERMANENT ADDRESS	House/Block/Lot No. ZONE IV Street TANUHA Subdivision/Village Barangay TOLOSA LEYTE City/Municipality Province
8. WEIGHT (kg)	54	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	O+	20. MOBILE NO.	0993-557-7940 / 0926-340-3883
10. GSIS ID NO.	N/A	21. E-MAIL ADDRESS (if any)	maigroceviray@gmail.com
11. PAG-IBIG ID NO.	191262008317		
12. PHILHEALTH NO.	21-200752477-0		
13. SSS NO.	34-8319603-3		
14. TIN NO.	614-844-310		
15. AGENCY EMPLOYEE NO.	N/A		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A	23. NAME of CHILDREN (Write full name and sex)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		N/A	
MIDDLE NAME			
OCCUPATION			
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME	VIRAY		
FIRST NAME	BANJO (+)		
MIDDLE NAME	MARTIN		
25. MOTHER'S MAREN NAME			
SURNAME	CANALEJA		
FIRST NAME	ELMA (+)		
MIDDLE NAME	HERMOSILLA		

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 any)	YEAR GRADUATED	SCHOLARSHIP/ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	ANANAPON DEAN SCHOOL	BEC ELEMENTARY	6/1/2008	4/1/2009		2009	
SECONDARY	BONHARD NATIONAL HIGH SCHOOL	BEC HIGH SCHOOL GRADUATE	6/1/2009	4/1/2013		2013	
VOCATIONAL / TRADE COURSE							
COLLEGE	SANTA LORETO OF CALI	BACHELOR OF ELEMENTARY EDUCATION MAJOR IN ENGLISH	6/1/2015	7/28/2016	83 UNITS		
GRADUATE STUDIES							

SIGNATURE	DATE
	February 26, 2015

[illegible]

WORK EXPERIENCE

INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY JOB PAY GRADE & APPLICABLE STEP (Please "00" if INCREASING)	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
From	To						
5/20/2022	1/30/2025	CUSTOMER SERVICE REP.	CONCENTRY	35,300		SEPARATED	N
6/20/2023	3/31/2024	SALES DEVELOPMENT REP.	BOLD PH, INC	35,000		EOC	N
10/11/2020	8/5/2021	SALES MANAGER	YSABELLA RNLL	20,000		SEPARATED	N
10/20/2019	8/13/2020	CUSTOMER SERVICE REP.	TEUPERFORMANCE	34,000		SEPARATED	N
		(Nothing Follows)					

SIGNATURE

DATE _____

Feb. 26, 2015

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

26. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
	From	To		
AWANAWAY EMU - CHOD - SPC	7/1/2006	4/1/2007		SENATOR
AWANAWAY EMU - CHOD - SPC	7/1/2007	4/1/2008		VICE MAYOR
SAD - CENTRAL WYOM CHAIRMAN	8/1/2011	PRESENT		CHAIRPERSON
(Nothing Follows)				

(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 personnel)

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			
CONTACT CENTER SERVICE NCII	9/25/2019	10/15/2019	14 HRS	Technical	TECDA & LTC
Certified Sales & Marketing Consultant				Technical	HELP COACHING & BUSINESS SOLUTIONS INCORPORATED
Certified Entrepreneurship Management Practitioner (CEMP)				Technical	HELP COACHING & BUSINESS SOLUTIONS INCORPORATED
Certified Customer Experience Management Professional				Technical	HELP COACHING & BUSINESS SOLUTIONS INCORPORATED
Certificate in Talent Acquisition				Technical	HELP COACHING & BUSINESS SOLUTIONS INCORPORATED
Certificate in Cash Flow Management				Technical	HELP COACHING & BUSINESS SOLUTIONS INCORPORATED
Certificate in Office Administration				Technical	HELP COACHING & BUSINESS SOLUTIONS INCORPORATED
Certificate in Corporate Communication				Technical	HELP COACHING & BUSINESS SOLUTIONS INCORPORATED
Certificate in Political Principles of Govt & Entrepreneurship				Technical	HELP COACHING & BUSINESS SOLUTIONS INCORPORATED
Certificate in Performance Evaluation				Technical	HELP COACHING & BUSINESS SOLUTIONS INCORPORATED
Certificate in Training Needs Analysis				Technical	HELP COACHING & BUSINESS SOLUTIONS INCORPORATED
Certificate in Strategic Planning				Technical	HELP COACHING & BUSINESS SOLUTIONS INCORPORATED
Certificate in Vision Casting				Technical	HELP COACHING & BUSINESS SOLUTIONS INCORPORATED
Certificate in Marketing Strategies				Technical	HELP COACHING & BUSINESS SOLUTIONS INCORPORATED
SPAC - PB Development Center Phase	1/18/2020	1/18/2020	8 HRS	Technical	TELEPERFORMANCE
Public Speaking & Lobby Training	9/21/2011	9/21/2011	8 HRS	Technical	OPINION
TWO CENTRAL WYOM FIELD WORK DATA - GATHERING ORIENTATION	4/18/2013	4/19/2013	16 HRS	Technical	FINO

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	32. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
COMMUNICATION SKILLS	NC II HOLDER IN CONTACT CENTER SERVICE	N/A
LEADERSHIP SKILLS		
COMPLEX PROBLEM-SOLVING SKILLS		
ADAPTABILITY SKILLS		
ORGANIZATION & DATA MANAGEMENT		
PEOPLE & PROJECT MANAGEMENT		
STRONG SYSTEM THINKING SKILLS		

(Continue on separate sheet if necessary)

SIGNATURE

[Signature]

DATE

Feb. 26, 2025

Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person who has immediate supervision over you in the 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:

9/4/2013

PERMANENTLY DISMISSED

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, frayed contract or phased out (abolition) in the public or private sector?

☐ YES ☒ 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)?

☐ 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

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.
ARWIN AGIS ROLONA	BULAW, LEYTE	09463800398
MARK NEIL URBANO	BULAWAN, LEYTE	09935947449
YULA ENTERRO RAMILO	BULAWAN, LEYTE	09063989608



PHOTO

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, DDS, SSL, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government issued ID: PASSPORT
ID/License/Passport No.: P1977763B
Date/Place of Issuance: 6/17/2019 - DFA NCR SOUTH

Signature (Sign inside the Box)

03/26/2025

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this

26 FEB 2025

affiant exhibiting his/her validly issued government ID as indicated above.

MARIA SHEILA S. AQUILLO
PUBLIC ATTORNEY II
PERMANENTLY R.A. NO. 5881
Person Administering Oath