

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	TRIPOLI		
FIRST NAME	AMOR MAY	NAME EXTENSION (JR., SR)	
MIDDLE NAME	TIGOL		
3. DATE OF BIRTH (mm/dd/yyyy)	05/28/2000	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	BAYBAY, LEYTE	If holder of dual citizenship, please indicate the details.	Philippines
5. SEX	<input 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	House/Block/Lot No. Street MAKINHAS Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.53	ZIP CODE	6521
8. WEIGHT (kg)	49		
9. BLOOD TYPE	O+	18. PERMANENT ADDRESS	House/Block/Lot No. Street MAKINHAS Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6521
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	N/A	19. TELEPHONE NO.	N/A
13. SSS NO.	N/A	20. MOBILE NO.	09465362007
14. TIN NO.	N/A	21. E-MAIL ADDRESS (if any)	amormay282000@gmail.com
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)	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	TRIPOLI			
FIRST NAME	SAMUEL	NAME EXTENSION (JR., SR)	JR	
MIDDLE NAME	NUÑEZ			
25. MOTHER'S MAIDEN NAME				
SURNAME	TIGOL			
FIRST NAME	AMORA			
MIDDLE NAME	PAEL		(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	MAKINHAS ELEMENTARY SCHOOL	N/A	06/01/2006	03/31/2012	GRADUATED	2012	VALEDICTORIAN
SECONDARY	EAST VISAYAN ADVENTIST ACADEMY	N/A	06/01/2012	03/31/2018	GRADUATED	2018	PRINCIPAL'S LIST
VOCATIONAL / TRADE COURSE							
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY EDUCATION	06/01/2018	08/12/2022	GRADUATED	2022	CUM LAUDE
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE	AMOR MAY T. TRIPOLI	DATE	June 6, 2023
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