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

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE <u>PDS FORM</u> (Do not fill up. For CSC use only Print legibly. Tick appropriate boxes 🔲) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. PERSONAL INFORMATION 2. SURNAME LAUSE NAME EXTENSION (JR., SR) N/A FIRST NAME MARICAR MIDDLE NAME MADJUS 3. DATE OF BIRTH 16. CITIZENSHIP **FEBRUARY 5, 1999 ✓** Filipino (mm/dd/yyyy) Dual Citizenship 4. PLACE OF BIRTH LAS PIÑAS, CITY If holder of dual citizenship, Pls. indicate country: please indicate the details. Male **✓** Female 5 SEX $\overline{}$ ✓ Single Married 17. RESIDENTIAL ADDRESS N/A N/A 6 CIVIL STATUS House/Block/Lot No. Widowed Separated PANGASUGAN N/A Other/s: Subdivision/Villag Baranga BAYBAY LEYTE 7. HEIGHT (m) 1.51 Citv/Municipality Province 8. WEIGHT (kg) ZIP CODE 6521 18. PERMANENT ADDRESS N/A N/A 9. BLOOD TYPE 0 House/Block/Lot No. Street MANSAHA-ON N/A 10. GSIS ID NO. N/A Barangay Subdivision/Village MATAG-OB LEYTE 11. PAG-IBIG ID NO. N/A City/Municipality Province 12. PHILHEALTH NO. 1302-5534-2968 ZIP CODE 6532 13. SSS NO. 06-4116520-7 19. TELEPHONE NO N/A 14. TIN NO. 359-800949-0000 20. MOBILE NO. 09676851289 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) maricar.lause@gmail.com II. FAMILY BACKGROUND 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) N/A NAME EXTENSION (JR., SR) N/A N/A FIRST NAME 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 LAUSE NAME EXTENSION (JR., SR) FIRST NAME OSCAR MIDDLE NAME SALES 25. MOTHER'S MAIDEN NAME VIACRUCIS SURNAME LAUSE FIRST NAME MIRASOL (Continue on separate sheet if necessary) MIDDLE NAME MADJUS **EDUCATIONAL BACKGROUND** CHOLARSHI LEVEL/ 26 PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE ACADEMIC YEAR I FVFI UNITS EARNED GRADUATED (Write in full) (Write in full) From To RECEIVED ELEMENTARY MANSAHA-ON ELEMENTARY SCHOOL PRIMARY EDUCATION JUNE 16, 2005 MAY 10, 2011 GRADUATE 2011 SALUTATORIA MATAG-OB NATIONAL HIGH SCHOOL SPECIAL SCIENCE CLASS JUNE 6, 2011 MAY 18, 2015 GRADUATE HONORABLE VOCATIONAL / N/A TRADE COURSI BACHELOR OF SECONDARY EDUCATION MAJOR IN MAGNA CUM COLLEGE PALOMPON INSTITUTE OF TECHNOLOGY JUNE 4, 2015 MAY 24, 2019 GRADUATE 2019 ENGLISH LAUDE MASTER OF ARTS IN EDUCATION MAJOR IN POST-GRADUATE STUDIES PALOMPON INSTITUTE OF TECHNOLOGY AUGUST 8, 2020 PRESENT 24 N/A N/A ENGLISH SIGNATURE DATE JULY 13, 2021

IV. CIVIL	SERVICE EL	IGIBILITY							
		1080 (BOARD/ BAR) UNDER	DATING	DATE OF				LICENSE (if a	applicable)
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable)		EXAMINATION / CONFERMENT	PLACE OF EXAMINATI	ON / CONFERMENT		NUMBER	Date of Validity		
LICENSURE EXAMINATION FOR TEACHERS (LET) 84.4		SEPTEMBER 29, 2019	TACLOBA	IN CITY		1825617	02/05/2023		
CS	CSC HONOR GRADUATE ELIGIBILITY N/A		N/A	AUGUST 15, 2019	CSC REGIONAL OFFIC	CE TACLOBAN CITY		100108190412	26/07/2019
			(Contin	nue on separate sheet if n	ecessary)				
	EXPERIENC	E nent. Start from your rec	ent work) Descrip	tion of duties should	d he indicated in the at:	tached W	ork Experie	nce sheet	
28. INCL	USIVE DATES						SALARY/ JOB/ PAY GRADE (if		GOV'T
From	mm/dd/yyyy) To	POSITION T (Write in full/Do not		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY PAY GRADE (i applicable) & STE (Format "00-0") INCREMENT		STATUS OF APPOINTMENT	SERVICE (Y/N)
08/22/2020	09/12/2020	TELEMARKETIN	G STAFF	PFLEIDER-WARD	PFLEIDER-WARD SOLUTIONS CO. LTD			TRAINEE	N
10/21/2019	03/05/2020	CUSTOMER SERVICE RI		SYKES	S ASIA INC.	NA 18000.00	NA N/A	PROVISIONARY	N
03/18/21	07/16/21	PART-TIME INST	DUCTOR	VISAYAS STATE UNIV	ERSITY- DEPARTMENT OF	15000.00		JOB ORDER	Y
03/10/21	07/16/21	PART-TIWE INST	ROCTOR	LIBERAL ARTS AND BEHAVIORAL SCIENCES		15000.00		JOB ORDER	T
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SIGN	ATURE		Waus	nue on separate sheet if n	DATE		JULY 13, 2	2021	
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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		
(Michigan)	From	То		TOSTION/WHOLE OF WORK		
PIT COLLEGE STUDENT PUBLICATION-FULCRUM	06-24-2015	04-24-2019	3500 HRS	Deputy Editor II/ Jou	ırnalist	
PIT SCHIOLARS ASSOCIATION	12/07/2018	04-24-2019	65 HRS	Vice-President		
FUTURE EDUCATORS ORGANIZATION	06/06/2015	04-24-19	15 HRS	Member		
WORLD VISION DEVELOPMENT FOUNDATION	06/ 24/2014	09/23/2016	245 HRS	Facilitator		
VII. LEARNING AND DEVELOPMENT (L&D)		nue on separate si		S ATTENDED		
(Start from the most recent L&D/training program and inclu					ion Chief/Executive/Managerial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT	INCLUSIVE DATES OF ATTENDANCE		NUMBER OF HOURS	Type of LD (Managerial/	CONDUCTED/ SPONSORED BY	
INTERVENTIONS/TRAINING PROGRAMS (Write in full)	(mm/d From	d/vvvv) To	NUMBER OF HOURS	Supervisory/ Technical/etc)	(Write in full)	
BASIC COMPUTER OPERATION TRAINING	02-15-2021	02-28-2021	80.0	ICT	Palompon Institute of Technology	
REGIONAL TERTIARY SCHOOLS PRESS CONFERENCE	09-19-2018	09-22-2018	32.0	Journalism	Rappler/ CHEd	
REGIONAL TERTIARY SCHOOLS PRESS CONFERENCE	02-22-2017	02-25-2017	32.0	Journalism	Rappler/ CHEd	
	(Contir	nue on separate si	heet if necessary)			
VIII. OTHER INFORMATION					MEMBEROURIN	
31. SPECIAL SKILLS and HOBBIES NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)			MEMBERSHIP IN 33. ASSOCIATION/ORGANIZATION (Write in full)			
JOURNALISTIC SKILLS	CHAMPION ON FEATURE WRITING FILIPINO DURING THE REGIONAL TERTIARY SCHOOLS PRESS CONFERENCE 2018			PIT COLLEGE STUDENT PUBLICATION-FULCRUM		
HOSTING	FITTH PLACE RADIO BROADCASTING RTSPC 2018			FUTURE EDUCATORS ORGANIZATION		
GARDENING	EDITORIAL WRITER OF THE YEAR 2018			PIT SCHOLARS ASSOCIATION		
BLOGGING	SECOND PLACE NEWS WRITING FILIPINO IN RTSPC 2017		SPC 2017	WORLD VISION DEVELOPMENT FOUNDATION		
(Continue on separate sheet if necessary)						
SIGNATURE	(Contir Maus	•		ATE	JULY 13, 2021	
	.)				CS FORM 212 (Revised 2017), Page 3 of 4	

 34. Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Care 				
35. a. Have you ever been found guilty of any administrative offe				
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 an	☐ YES ☑ NO If YES, give details:			
37. Have you ever been separated from the service in any of the	☐ YES ☑ NO If YES, give details:			
a. Have you ever been a candidate in a national or local elect b. Have you resigned from the government service during the	If YES, give details:			
39. Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):			
 40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 89 a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 	☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:			
41. REFERENCES (Person not related by consanguinity or affinity to applican	it /appointee)			
NAME	ADDRESS	TEL. NO.		
ROTHELIA MARIA G. UGSAD	PALOMPON, LEYTE	N/A		
ROUSHIELL FRANCE S. LONDON	PALOMPON, LEYTE	N/A		
MARTHY JOHN LUBIANO	PALOMPON, LEYTE	N/A		
42. I declare under oath that I have personally accomplished this complete statement pursuant to the provisions of pertinent Philippines. I authorize the agency head/authorized represer I agree that any misrepresentation made in this docume administrative/criminal case/s against me.	laws, rules and regulations of the ntative to verify/validate the content	Republic of the ats stated herein.	MARICAR M. LAUSE	
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance				
Government Issued ID: PhilHealth				
ID/License/Passport No.: 13-025534296-8	Signature (Sign Inside			
Date/Place of Issuance: May 2019/ Ormoc City	JULY 13, 2021 Date Accomplish	ed	Right Thumbmark	
SUBSCRIBED AND SWORN to before me this	, affiant exhibiting his/her validly i		indicated above.	