

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	MONTILLA		
FIRST NAME	JUNN REE	SR.	
MIDDLE NAME	BILLONES		
3. DATE OF BIRTH (mm/dd/yyyy)	06/23/1990	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.	<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	NAGA, ZAMBOANGA SIBUGAY		
5. SEX	<input checked="" 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 ZIP CODE	PUROK 10, MAGLASANG ROAD, LARAY House/Block/Lot No. Street PITOGO Subdivision/Village Barangay CONSOLACION CEBU City/Municipality Province
7. HEIGHT (m)	1.65		
8. WEIGHT (kg)	60		6001
9. BLOOD TYPE	O+		
10. GSIS ID NO.	N/A	18. PERMANENT ADDRESS ZIP CODE	PUROK 2, PALMERA, House/Block/Lot No. Street CROSSING SANTA CLARA Subdivision/Village Barangay NAGA ZAMBOANGA SIBUGAY City/Municipality Province
11. PAG-IBIG ID NO.			
12. PHILHEALTH NO.	142013282926 (Indigenous)		7004
13. SSS NO.	1011784893		
14. TIN NO.	3398116050000	19. TELEPHONE NO.	N/A
20. MOBILE NO.	+63 905 863 6195		
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	junnree.montilla@g.msuiit.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	MONTILLA		SEPTEMBER 28, 1957	
FIRST NAME	WENCESLAO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	LEGARA			
25. MOTHER'S MAIDEN NAME	BILLONES		NOVEMBER 3, 1958	
SURNAME	BILLONES			
FIRST NAME	EDNA			
MIDDLE NAME	SIGASIG		(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	CROSSING SANTA CLARA ELEMENTARY SCHOOL	ELEMENTARY DIPLOMA	1997	2003		2003	2ND HON. MENTION
SECONDARY	MARCELO SPINOLA SCHOOL	HIGH SCHOOL DIPLOMA	2003	2007		2007	WITH HONORS
VOCATIONAL / TRADE COURSE	ZAMBOANGA SIBUGAY POLYTECHNIC INSTITUTE (KABASALAN INSTITUTE OF TECHNOLOGY)	CERTIFICATE IN ARCHITECTURAL DRAFTING TECHNOLOGY	2007	2008	58	---	
COLLEGE	MINDANAO STATE UNIVERSITY MAIN CAMPUS	BACHELOR OF SCIENCE IN MATHEMATICS	2009	2015		2015	
GRADUATE STUDIES	ILIGAN INSITUTE OF TECHNOLOGY OF THE MINDANAO STATE UNIVERSITY	MASTEROF SCIENCE IN MATHEMATICS EDUCATION	2019	2023		Dec-23	DOST-SEI SCHOLAR

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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IV. CIVIL SERVICE ELIGIBILITY					
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
LICENSURE EXAMINATION FOR TEACHERS	87.00%	05/07/2019	CAGAYAN DE ORO CITY	1792822	
TEACHING ENGLISH TO FOREIGN LEARNERS	HIGH DISTINCTION	01/31/2022	TEFL PROFESSIONAL DEVELOPMENT INSTITUTE	1525858489PE	

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

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

28. 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 (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/ N)
From	To						
01/05/2023	05/31/2023	COLLEGE MATHEMATICS INSTRUCTOR (PART TIME LECTURER)	SAINT MICHAEL'S COLLEGE	23400		PART TIME	N
01/05/2022	12/31/2022	UNIVERSITY RESEARCH ASSISTANT	MSU - ILIGAN INSTITUTE OF TECHNOLOGY	15808.20		CONTRACTUAL	Y
01/05/2019	12/52019	ON-CALL MATH LECTURER	SAINT LOUIS REVIEW CENTER	10000		PART TIME	N
06/03/2017	03/31/2018	FULLTIME SHS ADVISER (STEM)/PART-TIME COLLEGE LECTURER	SAINT PETER'S COLLEGE	13500		CONTRACTUAL	N
06/05/2016	05/31/2017	FULLTIME SHS ADVISER (STEM)/PART-TIME COLLEGE LECTURER	PHILIPPINE ENGINEERING AND AGRO-INDUSTRIAL COLLEGE, INC.	13280		CONTRACTUAL	N
04/03/2016	05/31/2016	TEACHING SUMMER CLASS	MARAWI SMART KIDS, INC.	8500		PART TIME	N
06/03/2015	03/31/2016	FULLTIME JHS ADVISER	AL-FARABI INTERNATIONAL ACADEMY, INC.	7500		CONTRACTUAL	N
05/01/2010	12/05/2014	VOLUNTEER MATH LECTURER/TEACHER	JESUS THE GREAT SHEPHERD FELLOWSHIP, INC.	3000		VOLUNTARY	N

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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[illegible]

(Continue on separate sheet if necessary)

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

[illegible]

(Continue on separate sheet if necessary)

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	
Technical Drafting		
Cooking		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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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)?

☐ YES

☒ NO

☐ YES

☒ 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?

☐ YES

☒ NO

If YES, give details:

☐ 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:
FINISHED CONTRACT

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?

☐ YES

☒ NO

If YES, give details: _____

☐ 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?
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 applicant /appointee)

NAME	ADDRESS	TEL. NO.
ASSOC. PROF. ROXAN A. CONSOLACION, Ed. D	MSU - ILIGAN INSTITUTE OF TECHNOLOGY	9171449036
PROF. EDEL B. MONTEROLA, PhD	SAINT MICHAEL'S COLLEGE	9171571281
ASSOC. PROF. HARREN J. CAMPUS, PhD	MINDANAO STATE UNIVERSITY	9126331703

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, Drivers License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: PRC ID

ID/License/Passport No.: 1792822

Date/Place of Issuance: 07/08/2019 - PRC CDO CITY

Signature (Sign inside the box)

Date Accomplished

ID picture taken within the last 6 months
3.5 cm. X 4.5 cm
(passport size)

With full and handwritten name tag and signature over printed name

Computer generated or photocopied picture is not acceptable

PHOTO

Right Thumbmark

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

Person Administering Oath

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