

# 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	PANTO		
FIRST NAME	IBONA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	LUNZAGA	N/A	
3. DATE OF BIRTH (mm/dd/yyyy)	5/24/1990	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	BUTUAN CITY	If holder of dual citizenship, please indicate the details.	Peru
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	F. ABLEN ST. House/Block/Lot No. Street COGON COMBADO Subdivision/Village Barangay ORMOG CITY LEYTE City/Municipality Province
7. HEIGHT (m)	5'2	ZIP CODE	6541
8. WEIGHT (kg)	55 KG.	18. PERMANENT ADDRESS	F. ABLEN ST. House/Block/Lot No. Street COGON COMBADO Subdivision/Village Barangay ORMOG CITY LEYTE City/Municipality Province
9. BLOOD TYPE	AB+	ZIP CODE	6541
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	N/A	20. MOBILE NO.	09518019522
12. PHILHEALTH NO.	N/A	21. E-MAIL ADDRESS (if any)	<a href="mailto:pantoibona@gmail.com">pantoibona@gmail.com</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		NAME EXTENSION (JR., SR)	IVORYVONE PANTO	2/25/2018
MIDDLE NAME				
OCCUPATION	ASSOCIATE PROFESSOR III			
EMPLOYER/BUSINESS NAME	ACLC COLLEGE-ORMOC			
BUSINESS ADDRESS	LILIA AVENUE, COGON ORMOG CITY			
TELEPHONE NO.	560-8000			
24. FATHER'S SURNAME	PANTO			
FIRST NAME	BONIFACIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	SUMINGUIT			
25. MOTHER'S MAIDEN NAME	LUNZAGA			
SURNAME	PANTO			
FIRST NAME	DOROTEA			
MIDDLE NAME	MORPOS		(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	COGON ELEMENTARY SCHOOL		1996	2002		2002	

SECONDARY	NEW ORMOC CITY NATIONAL HIGH SCHOOL		2002	2006		2006	
VOCATIONAL / TRADE COURSE	ACL C COLLEGE-ORMOC	ASSOCIATE IN SOFTWARE DEVELOPMENT	2007	2009		2009	
COLLEGE	ACL C COLLEGE-ORMOC	BACHELOR OF SCIENCE IN COMPUTER SCIENCE	2009	2012		2012	DEANS LIST
GRADUATE STUDIES	ASIAN DEVELOPMENT FOUNDATION COLLEGE	MASTER IN INFORMATION TECHNOLOGY	2013	2016		2016	
	CEBU INSTITUTE OF TECHNOLOGY -UNIVERSITY	DOCTOR IN INFORMATION TECHNOLOGY	2020	2024		2024	
<i>(Continue on separate sheet if necessary)</i>							
SIGNATURE			DATE		July 8, 2024		

#### IV. CIVIL SERVICE ELIGIBILITY


[illegible]

(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.*

[illegible]


<i>(Continue on separate sheet if necessary)</i>							
<b>SIGNATURE</b>				<b>DATE</b>	7/8/2024		

## 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		
	13TH INTERNATIONAL CONFERENCE ON EDUCATIONAL & INFORMATION TECHNOLOGY IN CHENGDU, CHINA	3/24/2024	March 24,2024	4 hrs.	SESSION CHAIR
	ORMOKAMPEON (ORMOC YOUTH DEVELOPMENT)-SINGING IDOL	Jan. 2017	June 2017	2.0	HOST/EMCEE EVERY SUNDAY
	COMMUNITY SERVICE	March 29,2008	March 29,2008	8 hrs.	LEADER
	DIVISION TECHNOLYMPICS 2017	Sept. 29, 2017	Sept. 29, 2017	4 hrs.	JUDGE
	DIVISION TECHNOLYMPICS	Oct. 6,2015	Oct. 6,2015	4 hrs	JUDGE
	SHOWCASING THE TALENT OF LEARNERS THROUGH TECHNOLOGY	Nov. 7, 2014	Nov. 7, 2014	4 hrs.	JUDGE


*(Continue on separate sheet if necessary)*

[illegible]

(Continue on separate sheet if necessary)

## VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
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SINGING(LOCAL PERFORMER)	THE VOICE OF ISABEL 2015 (ISABEL , LEYTE)	
PAGEENTRY	MISS TEEN 2016 (INOPACAN,LEYTE)	
SPORTSFEST(PAGEANT)	MISS SPORTSFEST 2007 (ACLC COLLEGE-ORMOC)	
AMATEURIST(SINGING)	BEST SINGING DUO 2018 (ROBINSONS ORMOC CITY)	
AMATEURIST(SINGING)	TAWAG NG TANGHALAN DAILY CONTENDER 2016	
SINGING(LOCAL PERFORMER)	FORMER MONTHLY FINALIST JUNE 2024	MANNY PACMAN 91.1 RADIO
<i>(Continue on separate sheet if necessary)</i>		
SIGNATURE		DATE
		7/8/2024

<p>34. 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 Office, Bureau or Department where you will be appointed,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <hr/> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">Status of Case/s: _____</p>												
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>												
<p>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</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, please specify ID No: <u>DC-0397</u></p>												
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><b>MARLENE MAHIDLAYON</b></td> <td style="text-align: center;"><b>RIZAL, KANANGA LEYTE</b></td> <td style="text-align: center;"><b>09056714140</b></td> </tr> <tr> <td style="text-align: center;"><b>ELLEN MONTESCLAROS</b></td> <td style="text-align: center;"><b>ORMOC CITY</b></td> <td style="text-align: center;"><b>09619713200</b></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	<b>MARLENE MAHIDLAYON</b>	<b>RIZAL, KANANGA LEYTE</b>	<b>09056714140</b>	<b>ELLEN MONTESCLAROS</b>	<b>ORMOC CITY</b>	<b>09619713200</b>			
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<b>ELLEN MONTESCLAROS</b>	<b>ORMOC CITY</b>	<b>09619713200</b>											
<p>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.</p>													

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) <span style="float: right;">PLEASE INDICATE ID Number and Date</span>
Government Issued ID: _____
ID/License/Passport No.: _____
Date/Place of Issuance: _____

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