

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)?

If YES, give details: _____

35. a. Have you ever been found guilty of any administrative offense?

If YES, give details: _____

b. Have you been criminally charged before any court?

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?

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?

If YES, give details: _____ finish contract

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?

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?

If YES, give details: _____

39. Have you acquired the status of an immigrant or permanent resident of another country?

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?

If YES, please specify: _____

b. Are you a person with disability?

If YES, please specify ID No: _____

c. Are you a solo parent?

If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)

NAME	ADDRESS	TEL. NO.
JUANITO V. MILLAN	BAGONG SILANG, MACROHON SOUTHERN LEYTE	9358143699
KRISTA R. PEREZ	LOWER VILLA JACINTA, MACROHON, SOUTHERN LEYTE	9107884444
ISABEL A. ENRIQUEZ	SAN ROQUE, MACROHON, SOUTHERN LEYTE	9163204555

42.



ARJAY M. GARRIDO



Right Thumbmark

Government issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)

PLEASE INDICATE ID Number and Date of Issuance

Government issued ID: PRC

ID/License/Passport No.: 0028909

Date/Place of Issuance: 02/15/16, TACLOBAN

Signature (Sign inside the box)

01/05/2023

Date Accomplished

JAN 11 2023

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

SUBSCRIBED AND SWORN to before me this

ATTY. KRISTEN SPICER MEDALLA DE VEYRA
NOTARY PUBLIC, TACLOBAN CITY, LEYTE
NC NO. 2017-22 UNTIL DECEMBER 31, 2023
RC NO. 67395
SOLICITOR AT LAW

IBP LIFE TIME MEMBER
PUNONG BARILAYAN
PUNONG BARILAYAN

COR P. BAGOS J. JUAN LUNA SIS: BNOT 55: TACLOBAN CITY

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			
	N/A					
(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 positions						
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			
	PRODUCTION OF HIGH QUALITY INBRED RICE, SEED CERTIFICATION AND FARM MECHANIZATION	29/10/2020	29/12/2020	94	TECHNICAL	HAPPY FARM/TESDA
	AGRICULTURAL SUSTAINABILITY INITIATIVES(ASI) PROGRAM AND AGRI-KLINIC	28/06/2019	29/06/2019	16	TECHNICAL	DEPARTMENT OF AGRICULTURE
	BEE TELLS THEIR SECRET: TRAINING ON BASIC BEEKEEPING	25/09/2018	27/09/2018	24	TECHNICAL	AGRICULTURAL TRAINING INSTITUTE
	MIX'EM UP: ORGANIC FEED FORMULATION	17/04/2018	19/04/2018	24	TECHNICAL	AGRICULTURAL TRAINING INSTITUTE
(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)	
	BASKETBALL	N/A			ALPHA KAPPA RHO frat/sor	
	TABLE TENNIS					
	COMPUTER LITERACY					
	COMMUNICATION					
	FARMING					
(Continue on separate sheet if necessary)						
SIGNATURE		DATE		01/05/2023		

PERSONAL DATA SHEET

Record

C. Tado. **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.**

I. PERSONAL INFORMATION

2. SURNAME		GARRIDO		1. CS ID No.		(Do not fill up. For CSC use only)	
FIRST NAME		ARJAY		NAME EXTENSION (JR., SR)			
MIDDLE NAME		MADREDIJO					
3. DATE OF BIRTH (mm/dd/yyyy)		29/12/1994		16. CITIZENSHIP			
4. PLACE OF BIRTH		ILIHAN, MACROHON SOUTHERN LEYTE		If holder of dual citizenship, please indicate the details.		Pls. indicate country:	
5. SEX							
6. CIVIL STATUS				17. RESIDENTIAL ADDRESS		ESTRELLA	
				House/Block/Lot No.		Street	
						ILIHAN	
				Subdivision/Village		Barangay	
				MACROHON		SOUTHERN LEYTE	
				City/Municipality		Province	
7. HEIGHT (m)		1.685 M		ZIP CODE			
8. WEIGHT (kg)		69 KG					
9. BLOOD TYPE		O		18. PERMANENT ADDRESS		ESTRELLA	
10. GSIS ID NO.		N/A		House/Block/Lot No.		Street	
11. PAG-BIG ID NO.		N/A				ILIHAN	
12. PHILHEALTH NO.		N/A		Subdivision/Village		Barangay	
				MACROHON		SOUTHERN LEYTE	
				City/Municipality		Province	
13. SSS NO.		34-5451656-1		ZIP CODE		6601	
14. TIN NO.		476-570-589		19. TELEPHONE NO.		09466949429	
15. AGENCY EMPLOYEE NO.		N/A		20. MOBILE NO.		09466949429	
				21. E-MAIL ADDRESS (if any)		akocarjaygarrido@gmail.com	

II. FAMILY BACKGROUND

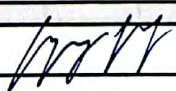
22. SPOUSE'S SURNAME		N/A		23. NAME of CHILDREN (Write full name and list all)		DATE OF BIRTH (mm/dd/yyyy)	
FIRST NAME		N/A		NAME EXTENSION (JR., SR)			
MIDDLE NAME		N/A					
OCCUPATION		N/A					
EMPLOYER/BUSINESS NAME		N/A					
BUSINESS ADDRESS		N/A					
TELEPHONE NO.		N/A					
24. FATHER'S SURNAME		GARRIDO					
FIRST NAME		ROMMEL		SR.			
MIDDLE NAME		TRIPOLI					
25. MOTHER'S MAIDEN NAME		GARRIDO					
SURNAME		MADREDIJO					
FIRST NAME		MARIETTA					
MIDDLE NAME		ZAPANTA					

(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	ICHON, ELEMENTARY, SCHOOL	Primary	2001	2007	GRADUATE	2007	N/A
SECONDARY	ICHON, NATIONAL, HIGH SCHOOL	Secondary	2007	2011	GRADUATE	2011	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF ANIMAL SCIENCE	2011	2015	GRADUATE	2015	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/05/2023
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