

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	GUMBA		
FIRST NAME	REINALYN	NAME EXTENSION (JR., SR)	
MIDDLE NAME	PERNITO		
3. DATE OF BIRTH (mm/dd/yyyy)	10/18/1992	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	LEYTE		
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 ZIP CODE	House/Block/Lot No. Street ZONE 6 PATAG Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.53		
8. WEIGHT (kg)	65		
9. BLOOD TYPE	O		
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	121090175932	18. PERMANENT ADDRESS ZIP CODE	House/Block/Lot No. Street ZONE 6 PATAG Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
12. PHILHEALTH NO.	120512151693		
13. SSS NO.	0633921378		
14. TIN NO.	314 281 294 000	19. TELEPHONE NO.	N/A
15. AGENCY EMPLOYEE NO.	VJ001357	20. MOBILE NO.	09199808199
		21. E-MAIL ADDRESS (if any)	hannahyaga92@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)	N/A	N/A
MIDDLE NAME	N/A		N/A	N/A
OCCUPATION	N/A		N/A	N/A
EMPLOYER/BUSINESS NAME	N/A		N/A	N/A
BUSINESS ADDRESS	N/A		N/A	N/A
TELEPHONE NO.	N/A		N/A	N/A
24. FATHER'S SURNAME	GUMBA		N/A	N/A
FIRST NAME	ALLAN	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	POLIQUIT		N/A	N/A
25. MOTHER'S MAIDEN NAME			N/A	N/A
SURNAME	PERNITO		N/A	N/A
FIRST NAME	MERLITA		N/A	N/A
MIDDLE NAME	CAJERIC		(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	PATAG ELEMENTARY SCHOOL	PRIMARY EDUCATION	1999	2005	N/A	2005	N/A
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	HIGH SCHOool	2005	2009	N/A	2009	N/A
VOCATIONAL / TRADE COURSE	UHA CAREGIVER TRAINING CORP	CAREGIVING	2017	2018	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRIBUSINESS	2009	2013	N/A	2013	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	12/21/22
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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
		From	To		
	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

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

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			
	Integrated Seminar-Workshop on Nurturing Work Ethics that Companies Values Most and Excellent Customer Service	11/03/2015	11/04/2015	16.0	TECHNICAL	Executive Development Academy
	Know your Money and Counterfeit Detection Seminar	04/23/2015	04/23/2015	8.0	TECHNICAL	MLhuiillier Financial Services inc
	Gold Appraisal Seminar	01/06/2015	01/08/2015	24.0	TECHNICAL	MLhuiillier Financial Services inc
	Kwarta Padala Seminar	01/08/2014	01/08/2014	8	TECHNICAL	MLhuiillier Financial Services inc
	AFNR Training on Entrepreneurship	07/04/2010	07/04/2010	4.0	TECHNICAL/ EDUCATIONAL	Visayas State University
	Entrepreneurship Forum	01/03/2012	01/03/2012	8.0	TECHNICAL/ EDUCATIONAL	Visayas State University
	Research and Science Fair	01/09/2009	01/09/2009	8.0	TECHNICAL/ EDUCATIONAL	Visayas State University

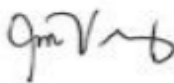


(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Computer Skills		N/A		N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	12/21/22
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<div>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,</div> <div>a. within the third degree?</div> <div>b. within the fourth degree (for Local Government Unit - Career Employees)?</div>		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details:</div> <div></div>												
<div>35. a. Have you ever been found guilty of any administrative offense?</div> <div>b. Have you been criminally charged before any court?</div>		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details:</div> <div></div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details:</div> <div>Date Filed: </div> <div>Status of Case/s: </div>												
<div>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</div>		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details:</div> <div></div>												
<div>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?</div>		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details:</div> <div></div>												
<div>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</div> <div>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?</div>		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details:</div> <div></div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details:</div> <div></div>												
<div>39. Have you acquired the status of an immigrant or permanent resident of another country?</div>		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country):</div> <div></div>												
<div>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:</div> <div>a. Are you a member of any indigenous group?</div> <div>b. Are you a person with disability?</div> <div>c. Are you a solo parent?</div>		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify:</div> <div></div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No:</div> <div></div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No:</div> <div></div>												
<div>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</div> <table><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>Dr. Manuel D.Gacutan Jr.</td><td>Baybay City, Leyte</td><td>09171474757</td></tr><tr><td>Regina C. Bibera</td><td>Baybay City, Leyte</td><td></td></tr><tr><td></td><td></td><td></td></tr></tbody></table> <div>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.</div>			NAME	ADDRESS	TEL. NO.	Dr. Manuel D.Gacutan Jr.	Baybay City, Leyte	09171474757	Regina C. Bibera	Baybay City, Leyte				
NAME	ADDRESS	TEL. NO.												
Dr. Manuel D.Gacutan Jr.	Baybay City, Leyte	09171474757												
Regina C. Bibera	Baybay City, Leyte													
<div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)</div> <div>PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: UMID</div> <div>ID/License/Passport No.: 0111-3073681-6</div> <div>Date/Place of Issuance: SSS MAKATI</div>	<div></div> <div>Signature (Sign inside the box)</div> <div>12/21/22</div> <div>Date Accomplished</div>	<div></div> <div>PHOTO</div> <div></div> <div>Right Thumbmark</div>												
<div>SUBSCRIBED AND SWORN to before me this , affiant exhibiting his/her validly issued government ID as indicated above.</div> <div></div> <div>Person Administering Oath</div>														