

# 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

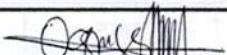
2. SURNAME	OQUIAS		
FIRST NAME	JHEZEL	NAME EXTENSION (JR, SR)	
MIDDLE NAME	BACALSO		
3. DATE OF BIRTH (mm/dd/yyyy)	9/13/1999	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	ORMOC CITY	If holder of dual citizenship, please indicate the details.	
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	MACATOL House/Block/Lot No. Street PUERTO BELLO Subdivision/Village Barangay MERIDA LEYTE City/Municipality Province
7. HEIGHT (m)	149m	ZIP CODE	6540
8. WEIGHT (kg)	37kg	18. PERMANENT ADDRESS	MACATOL House/Block/Lot No. Street PUERTO BELLO Subdivision/Village Barangay MERIDA LEYTE City/Municipality Province
9. BLOOD TYPE	Unknown	ZIP CODE	6540
10. GSIS ID NO.	NONE	19. TELEPHONE NO.	NONE
11. PAG-IBIG ID NO.	1213-1125-2248	20. MOBILE NO.	0948 097 8821 / 0935 952 9334
12. PHILHEALTH NO.	13-025615780-3	21. E-MAIL ADDRESS (if any)	oquiasjhezel808@gmail.com
13. SSS NO.	06-4508643-4		
14. TIN NO.	778-569-218-00000		
15. AGENCY EMPLOYEE NO.	24622		

## 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	OQUIAS			
FIRST NAME	BENJAMIN	JR.		
MIDDLE NAME	BAÑO			
25. MOTHER'S MAIDEN NAME				
SURNAME	BACALSO			
FIRST NAME	PABLITA			
MIDDLE NAME	SAMPON			

## 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	PUERTO BELLO ELEMENTARY SCHOOL	ELEMENTARY	2006	2012		2012	WITH HONOR
SECONDARY	PUERTO BELLO NATIONAL HIGH SCHOOL	SENIOR HIGH SCHOOL	2012	2018		2018	WITH HONOR
VOCATIONAL / TRADE COURSE							
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRIBUSINESS	2018	2022		2022	CUM LAUDE
GRADUATE STUDIES							

SIGNATURE		DATE	09/25/2024
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[illegible][illegible]

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Accurate Cash Handling				
	Basic Financial Knowledge				
	Strong Customer Service Abilities				
	MS Word & Excel Literate				
	Reading Books				
	Watching Movies				
	Abstract art & lines				

~~Quesada~~

09/25/2024



<p>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,</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> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>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 items:</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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</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>FIL ADREAN P. JAPUS</td> <td>BATO, LEYTE</td> <td>09154982831</td> </tr> <tr> <td>VIOLETA M. YCONG</td> <td>SOGOD, SOUTHERN LEYTE</td> <td>09125022028</td> </tr> <tr> <td>FLORENCE L. CALDERON</td> <td>MERIDA, LEYTE</td> <td>0999731128</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	FIL ADREAN P. JAPUS	BATO, LEYTE	09154982831	VIOLETA M. YCONG	SOGOD, SOUTHERN LEYTE	09125022028	FLORENCE L. CALDERON	MERIDA, LEYTE	0999731128
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<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>													
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<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 10px;"></div> <p style="text-align: center; margin-top: 5px;">Person Administering Oath</p> </div> <div style="width: 45%; text-align: center;">     <p>Right Thumbmark</p> </div> </div>													