

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	MAHUSAY			
FIRST NAME	MANUEL	NAME EXTENSION (JR., SR)JR.		
MIDDLE NAME	DE LAS ALAS			
3. DATE OF BIRTH (mm/dd/yyyy)	05/02/1997	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	CANDELARIA, QUEZON	If holder of dual citizenship, please indicate the details.		
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:			
7. HEIGHT (m)	1.63 m	17. RESIDENTIAL ADDRESS	N/A	
8. WEIGHT (kg)	85 kg		ZIP CODE	6521
9. BLOOD TYPE	O		18. PERMANENT ADDRESS	N/A
10. GSIS ID NO.	-			N/A
11. PAG-IBIG ID NO.	1212-4260-8851	N/A		
12. PHILHEALTH NO.	1325-0337-9299	N/A		
13. SSS NO.	06-42366066-1	N/A		
14. TIN NO.	619-978-542	19. TELEPHONE NO.	N/A	
15. AGENCY EMPLOYEE NO.	N/A	20. MOBILE NO.	09158676606	
		21. E-MAIL ADDRESS (if any)	mj.mahusay56@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	
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	MAHUSAY			
FIRST NAME	MANUEL	SR.		
MIDDLE NAME	ILAGAN			
25. MOTHER'S MAIDEN NAME				
SURNAME	DE LAS ALAS			
FIRST NAME	NENITA			
MIDDLE NAME	REYES		(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	CARIDAD ELEMENTARY SCHOOL	PRIMARY	2007	2010		2010	WITH HONOR
SECONDARY	DR. GERONIMO B. ZALDIVAR MEMORIAL SHOOLOF FISHERIES	HIGH SCHOOL	2010	2014		2014	-
VOCATIONAL / TRADE COURSE	MICROCADD	COMPREHENSIVE AUTOCAD AND ADVANCE AUTOCAD	2019	2019		N/A	-
COLLEGE	VISAYAS STATE UNIVERSITY	BS IN CIVIL ENGINEERING (UNDER GRADUATE)	2014	2019	3RD YEAR	N/A	-
GRADUATE STUDIES	N/A	N/A	N/A	N/A		N/A	N/A

(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
	PROFESSIONAL ELIGIBILITY	83.2	08/20/2023	CSC RO VIII	385950	11/03/2023
	DRIVER'S LICENSE	N/A	NON-PROF	LTO - BAYBAY CITY	H12-16-001066	05/02/2024

(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]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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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		
	COMMISSION ON YOUTH - CARIDAD PARISH	2013	2018	N/A	PRESIDENT
	COMMISSION ON YOUTH - BAYBAY VICARIATE	2014	2018	N/A	VICE-PRESIDENT
	COMMISSION ON YOUTH - DIOCESE OF MAASIN	2016	2024	N/A	CORE MEMBER OF THE COUNCIL

(Continue on separate sheet if necessary)

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

[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)
COOKING		COMMISSION ON YOUTH - DIOCESE OF MAASIN
PLAYING INSTRUMENTS (GUITAR, PIANO, BASS GUITAR, DRUMS)		KNIGHTS OF COLUMBUS

(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)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____	
	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: RESIGNATION _____	
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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____	
	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____	
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____	
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
ENGR. ROMEL B. LENGUAJE	BRGY. CARIDAD, BAYBAY CITY, LEYTE	9759342610
ENGR. SILVESTRE SANICO	BRGY. CARIDAD, BAYBAY CITY, LEYTE	9176244532
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, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance <hr/> Government Issued ID: DRIVER'S LICENSE <hr/> ID/License/Passport No.: H12-16-001066 <hr/> Date/Place of Issuance: 05/02/2019/LTO-BAYBAY	<div style="border: 1px solid black; height: 100px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Signature (Sign inside the box)</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Date Accomplished</div>	<div style="border: 1px solid black; padding: 10px; text-align: center; margin-bottom: 10px;"> ID picture taken within the last 6 months 4.5 cm. X 3.5 cm (passport size) Computer generated or photocopied picture is not acceptable </div> <div style="text-align: center; margin-bottom: 10px;">PHOTO</div> <div style="border: 1px solid black; height: 100px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Right Thumbmark</div>
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.		
<div style="border: 1px solid black; width: 100%; height: 50px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Person Administering Oath</div>		