

# 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	ESPINOSA		
FIRST NAME	JOY	NAME EXTENSION (JR., SR)	
MIDDLE NAME	SOLANO		
3. DATE OF BIRTH (mm/dd/yyyy)	10/27/1991	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	BAYBAY, LEYTE	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	House/Block/Lot No. Street BUNGA Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	0.129	ZIP CODE	
8. WEIGHT (kg)	55		
9. BLOOD TYPE	AB+	18. PERMANENT ADDRESS	House/Block/Lot No. Street BUNGA Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
10. GSIS ID NO.	NA	ZIP CODE	
11. PAG-IBIG ID NO.	121080492433		
12. PHILHEALTH NO.	130501452964		
13. SSS NO.	0631894229	19. TELEPHONE NO.	NA
14. TIN NO.	476480605	20. MOBILE NO.	+639070896184
15. AGENCY EMPLOYEE NO.	NA	21. E-MAIL ADDRESS (if any)	<a href="mailto:joy.espinosa@vsu.edu.ph">joy.espinosa@vsu.edu.ph</a>

## 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	ESPINOSA			10/04/1961
FIRST NAME	TIRSO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	ORNOPIA			
25. MOTHER'S MAIDEN NAME				11/29/1961
SURNAME	SOLANO			
FIRST NAME	CAROLINA			
MIDDLE NAME	SALUBRE		(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	BUNGA ELEMENTARY SCHOL	ELEMENTARY EDUCATION	06/01/1998	3/30/2004	NA	2004	WITH HONORS
SECONDARY	BUNGA NATIONAL HIGH SCHOOL	SECONDARY EDUCATION	06/01/2005	3/30/2008	NA	2008	WITH HONORS
VOCATIONAL / TRADE COURSE	NA	NA	NA	NA	NA	NA	
COLLEGE	VISAYAS STATE UNIVERSITY	COLLEGE	08/01/2016	6/22/2020		2020	
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	March 10, 2021
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[illegible]

**V. WORK EXPERIENCE**  
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

<b>SIGNATURE</b>		<b>DATE</b>	3/10/2021
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## VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

[illegible][illegible]

(Continue on separate sheet if necessary)

## VIII. OTHER INFORMATION

[illegible]

(Continue on separate sheet if necessary)

<b>SIGNATURE</b>		<b>DATE</b>	3/10/2021
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<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> <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 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: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>ROLDAN PIEDRAVERDE</td> <td>BRGY. BUNGA, BAYBAY CITY, LEYTE</td> <td></td> </tr> <tr> <td>JIMMY ESPINA</td> <td>PCC, NUEVA ECIIJA</td> <td>63945559102</td> </tr> <tr> <td>IVY VILLAR</td> <td>BRGY. BUNGA, BAYBAY CITY, LEYTE</td> <td>6.39467E+11</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	ROLDAN PIEDRAVERDE	BRGY. BUNGA, BAYBAY CITY, LEYTE		JIMMY ESPINA	PCC, NUEVA ECIIJA	63945559102	IVY VILLAR	BRGY. BUNGA, BAYBAY CITY, LEYTE	6.39467E+11
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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>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td style="padding: 2px;">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td style="padding: 2px;">Government Issued ID: <b>TIN</b></td> </tr> <tr> <td style="padding: 2px;">ID/License/Passport No.: <b>476-480-605</b></td> </tr> <tr> <td style="padding: 2px;">Date/Place of Issuance: <b>10/15/2015</b></td> </tr> </table>	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)	PLEASE INDICATE ID Number and Date of Issuance	Government Issued ID: <b>TIN</b>	ID/License/Passport No.: <b>476-480-605</b>	Date/Place of Issuance: <b>10/15/2015</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 80px; text-align: center; vertical-align: middle;"> </td> </tr> <tr> <td style="padding: 2px;">Signature (Sign inside the box)</td> </tr> <tr> <td style="padding: 2px; text-align: center;">3/10/2021</td> </tr> <tr> <td style="padding: 2px;">Date Accomplished</td> </tr> </table>		Signature (Sign inside the box)	3/10/2021	Date Accomplished	<div style="text-align: center;"> <p style="font-size: small;">JOY S. ESPINOSA</p> </div> <p style="text-align: center;">PHOTO</p> <div style="border: 1px solid black; height: 100px; margin-top: 10px;"></div> <p style="text-align: center;">Right Thumbmark</p>		
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<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; width: 300px; height: 60px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>													