

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	CAYUNDA		
FIRST NAME	NAMELIE		NAME EXTENSION (JR., SR)
MIDDLE NAME	ABENOJA		
3. DATE OF BIRTH (mm/dd/yyyy)	03/04/1992	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 CITY 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 type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	SITIO SAN VICENTE House/Block/Lot No. Street KILIM Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	4.9'	ZIP CODE	
8. WEIGHT (kg)	48		
9. BLOOD TYPE	O+	18. PERMANENT ADDRESS	SITIO SAN VICENTE House/Block/Lot No. Street KILIM Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
10. GSIS ID NO.	NONE	ZIP CODE	
11. PAG-IBIG ID NO.	9142-0942-2024		
12. PHILHEALTH NO.	12-051362180-4		
13. SSS NO.	CRN-0111-4545953-1	19. TELEPHONE NO.	NONE
14. TIN NO.	324-921-981	20. MOBILE NO.	09751870966/09514060417
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	namelieabenoja04@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	CAYUNDA		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	JULITO	NAME EXTENSION (JR., SR)	JAMES KENNETH A. CAYUNDA	12/10/2011
MIDDLE NAME	PARAISO		JHEIAN KATE A. CAYUNDA	11/06/2015
OCCUPATION	TECHNICIAN			
EMPLOYER/BUSINESS NAME	PRIMUS@KNOWLEDGE SPECIALISTS, INCORPORATED			
BUSINESS ADDRESS	MANILA			
TELEPHONE NO.				
24. FATHER'S SURNAME	ABENOJA			
FIRST NAME	LEONARDO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	ALAO			
25. MOTHER'S MAIDEN NAME				
SURNAME	OQUIAS			
FIRST NAME	BACILIDES			
MIDDLE NAME	MANTE		(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	KILIM ELEMENTARY SCHOOL	ELEMENTARY	06/20/1999	03/25/2004		2003-2004	DIPLOMA
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	HIGH SCHOOL	06/14/2004	03/25/2008		2007-2008	DIPLOMA
VOCATIONAL / TRADE COURSE	NONE	NONE	NONE	NONE		NONE	NONE
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF ANIMAL SCIENCE	06/20/2009	03/23/2010		UNDER-GRADUATE	CERTIFICATE OF TRAININGS
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE



DATE

August 29, 2025

IV. CIVIL SERVICE ELIGIBILITY

[illegible]


(Continue on separate sheet if necessary)





V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	AUGUST 29, 2025
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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			
	AFNR Training on Slaughtering and Chevron Product Processing	03/23/2010	03/23/1010	8.0	N/A	VISAYAS STATE UNIVERSITY
	SMALL RUMINANTS PRODUCTION TRAINING	10/15/2009	10/15/2009	8.0		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 LITERATE	N/A		N/A		
(Continue on separate sheet if necessary)						
SIGNATURE				DATE		

<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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">GEMMARIE A. URGEL</td> <td style="text-align: center;">VILLABA LEYTE</td> <td style="text-align: center;">09365445279</td> </tr> <tr> <td style="text-align: center;">JIMMY PUGOSA</td> <td style="text-align: center;">BRGY. MARCUS BAYBAY CITY LEYTE</td> <td style="text-align: center;">NONE</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	GEMMARIE A. URGEL	VILLABA LEYTE	09365445279	JIMMY PUGOSA	BRGY. MARCUS BAYBAY CITY LEYTE	NONE			
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JIMMY PUGOSA	BRGY. MARCUS BAYBAY CITY LEYTE	NONE											
<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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AUGUST 29, 2025													
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<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <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: 60px; margin-top: 10px;"></div> <div style="border: 1px solid black; padding: 5px; text-align: center; margin-top: 5px;"> Person Administering Oath </div> </div> <div style="width: 35%; text-align: center;">  <p>PHOTO</p> <div style="border: 1px solid black; height: 100px; margin-top: 10px;"></div> <p>Right Thumbmark</p> </div> </div>													