

# 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	BORER			
FIRST NAME	ALLAIN LOYD	NAME EXTENSION (JR., SR)		
MIDDLE NAME	CADUHAY			
3. DATE OF BIRTH (mm/dd/yyyy)	DECEMBER 5, 1994	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	ALANGALANG, LEYTE	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:	17. RESIDENTIAL ADDRESS	670 RIZAL House/Block/Lot No. Street HOLY CHILD I Subdivision/Village Barangay ALANGALANG LEYTE City/Municipality Province 6517	
7. HEIGHT (m)	1.62 m	ZIP CODE	670 RIZAL House/Block/Lot No. Street HOLY CHILD I Subdivision/Village Barangay ALANGALANG LEYTE City/Municipality Province 6517	
8. WEIGHT (kg)	50 kg		18. PERMANENT ADDRESS	670 RIZAL House/Block/Lot No. Street HOLY CHILD I Subdivision/Village Barangay ALANGALANG LEYTE City/Municipality Province 6517
9. BLOOD TYPE	B	ZIP CODE	19. TELEPHONE NO.	N/A
10. GSIS ID NO.	NONE		20. MOBILE NO.	09669561382
11. PAG-IBIG ID NO.	121215641696	21. E-MAIL ADDRESS (if any)	LAINLOYDBORER@GMAIL.COM	
12. PHILHEALTH NO.	13-250260782-4			
13. SSS NO.	06-4054893-5			
14. TIN NO.	344-078-381-000			
15. AGENCY EMPLOYEE NO.	VAJO-0019			

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	NONE		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NONE	NAME EXTENSION (JR., SR)	NONE	
MIDDLE NAME	NONE			
OCCUPATION	NONE			
EMPLOYER/BUSINESS NAME	NONE			
BUSINESS ADDRESS	NONE			
TELEPHONE NO.				
24. FATHER'S SURNAME	BORER			
FIRST NAME	TEODORO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	PEDRERA			
25. MOTHER'S MAIDEN NAME				
SURNAME	CADUHAY			
FIRST NAME	ALMA			
MIDDLE NAME	JUANO		(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	ALANGALANG I CENTRAL SCHOOL	PRIMARY	06/01/2002	3/31/2008	GRADUATE	2008	2ND HON. MEN.
SECONDARY	ALANGALANG NATIONAL HIGH SCHOOL	HIGH SCHOOL	06/01/2008	03/31/2012	GRADUATE	2012	CLASS VALEDICTORIAN
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	SAINT PAUL SCHOOL OF PROFESSIONAL STUDIES	BACHELOR OF SCIENCE IN ACCOUNTANCY	06/03/2012	04/02/2017	GRADUATE	2017	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	OCTOBER 9, 2020
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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
	RA 1080 (CPA BOARD EXAM)	79.0	10/6-7, 13-14/2017	CEBU CITY	0185169	05/12/2020

**(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)

<b>SIGNATURE</b>		<b>DATE</b>	<b>OCTOBER 9, 2020</b>
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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						
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)						
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			
	WORKSHOP ON THE UNIFORMITY OF THE UNIVERSITY'S SPECIFICS AND PRICES OF GOODS & TRAINING FOR THE IMPLEMENTATION (PPMP & PR) OF THE SUPPLIES, PROCUREMENT AND SUPPLIES MANAGEMENT INFORMATION SYSTEM	MAR. 10, 2020	MAR. 10, 2020	8 HOURS	TECHNICAL	VSU MAIN BAYBAY CITY, LEYTE
	SEMINAR ON TRAIN LAW	MAR. 01, 2018	MAR. 01, 2018	8 HOURS	TECHNICAL	BIR-LARGE TAXPAYERS DIVISION CEBU CITY
(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		PHILIPPINE INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANT	
	PUBLIC SPEAKING					
	SINGING AND PLAYING GUITAR					
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	OCTOBER 9, 2020	

<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 checked="" type="checkbox"/> YES      <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">RESIGNATION IN THE PRIVATE SECTOR</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>NANCY GONZALES</td> <td>ALANGALANG, LEYTE</td> <td>9984326603</td> </tr> <tr> <td>THELMA CAIMOY</td> <td>TACLOBAN CITY</td> <td>9173144397</td> </tr> <tr> <td>ELDA V. DELOS REYES</td> <td>TACLOBAN CITY</td> <td>9206641408</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	NANCY GONZALES	ALANGALANG, LEYTE	9984326603	THELMA CAIMOY	TACLOBAN CITY	9173144397	ELDA V. DELOS REYES	TACLOBAN CITY	9206641408
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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>													

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)	
PLEASE INDICATE ID Number and Date of Issuance	
Government Issued ID:	PRC LICENSE
ID/License/Passport No.:	0185169
Date/Place of Issuance:	NOVEMBER 2017/TACLOBAN CITY

Signature (Sign inside the box)
OCTOBER 9, 2020
Date Accomplished

ALLAIN LOYD C. BORER

PHOTO

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath

Right Thumbmark