

# 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	PASCUAL			
FIRST NAME	RYAN BEVERLO		NAME EXTENSION (JR., SR)	
MIDDLE NAME	VENTULA			
3. DATE OF BIRTH (mm/dd/yyyy)	11/13/1988	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		If holder of dual citizenship, please indicate the details.		
5. SEX	<input checked="" type="checkbox"/> Male <input 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	PASCUAL HOUSE BED & BREAKFAST BAYBAY-INOPACAN ROAD House/Block/Lot No. Street N/A BARANGAY CANDADAM Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province 6521	
7. HEIGHT (m)	1.71	18. PERMANENT ADDRESS	PASCUAL HOUSE BED & BREAKFAST BAYBAY-INOPACAN ROAD House/Block/Lot No. Street N/A BARANGAY CANDADAM Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province 6521	
8. WEIGHT (kg)	67		ZIP CODE	6521
9. BLOOD TYPE	O+			
10. GSIS ID NO.	N/A			
11. PAG-IBIG ID NO.	N/A			
12. PHILHEALTH NO.	120511228056			
13. SSS NO.	0632537187	19. TELEPHONE NO.	560-3436	
14. TIN NO.	283266794	20. MOBILE NO.	0915-019-4834	
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	PASCUALRYANBEVERLO@GMAIL.COM	

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	PASCUAL		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	SHARMAINE KIM	NAME EXTENSION (JR., SR)	LUCAS MATTEO A. PASCUAL	6/28/2017
MIDDLE NAME	AGAPAY		LILLIANA MAREE A. PASCUAL	4/29/2021
OCCUPATION	CALL CENTER			
EMPLOYER/BUSINESS NAME	TDCX PHILIPPINES INC.			
BUSINESS ADDRESS	CEBU IT PARK, LAHUG, CEBU CITY, PHILIPPINES			
TELEPHONE NO.	63288629500			
24. FATHER'S SURNAME	PASCUAL			
FIRST NAME	BEVERLO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	PLENOS			
25. MOTHER'S MAIDEN NAME				
SURNAME	VENTULA			
FIRST NAME	VICENTA			
MIDDLE NAME	DIAZ		(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	VISCA FOUNDATION ELEMENTARY SCHOOL					2001	
SECONDARY	LEYTE STATE UNIVERSITY LABORATORY HIGH SCHOOL					2005	
VOCATIONAL / TRADE COURSE							
COLLEGE	CEBU NORMAL UNIVERSITY					2009	
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE	R.B.P.	DATE	November 23, 2022
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