

PERSONAL DATA SHEET

WARNING: Any misinterpretation 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.

CS ID No.

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	COMALING		
FIRST NAME	SARAH JANE		
MIDDLE NAME	SOLIS		
3. DATE OF BIRTH (mm/dd/yyyy)	12/02/1997	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	ANTIPOLO, RIZAL	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	Street MANARUG Barangay JAVIER, LEYTE Province 6511
7. HEIGHT (m)	4'9"	ZIP CODE	
8. WEIGHT (kg)	44		
9. BLOOD TYPE	N/A		
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	121236935133	18. PERMANENT ADDRESS	Street MANARUG Barangay JAVIER, LEYTE Province 6511
12. PHILHEALTH NO.	120257652454		ZIP CODE
13. SSS NO.	0641982752	19. TELEPHONE NO.	N/A
14. TIN NO.	352-397-854	20. MOBILE NO.	09464537723
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	sarahjcomaling2018@gmail.com

II. FAMILY BACKGROUND

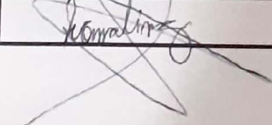
22. SPOUSE'S SURNAME	N/A		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A		N/A	N/A
MIDDLE NAME	N/A		N/A	N/A
OCCUPATION	N/A		N/A	N/A
EMPLOYER/BUSINESS NAME	N/A		N/A	N/A
BUSINESS ADDRESS	N/A		N/A	N/A
TELEPHONE NO.	N/A		N/A	N/A
24. FATHER'S SURNAME	COMALING			04/13/1967
FIRST NAME	MAXIMO	JR.		
MIDDLE NAME	RAMIREZ			
25. MOTHER'S MAIDEN NAME	MARGARITA G. SOLIS			08/16/1974
SURNAME	COMALING			
FIRST NAME	MARGARITA			
MIDDLE NAME	SOLIS			

(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	BINULHO ELEMENTARY SCHOOL	ELEMENTARY	2004	2010	GRADUATE	2010	3RD HON. MENTION
SECONDARY	JAVIER NATIONAL HIGH SCHOOL	SECONDARY	2010	2014	GRADUATE	2014	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF ELEMENTARY EDUC.	2014	2018	GRADUATE	2018	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	August 2, 2021
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IV. CIVIL SERVICE ELIGIBILITY

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
				NUMBER	Date of Validity
LICENSURE EXAMINATION	76.2	03/24/2019	CEBU CITY	1794316	N/A
FOR TEACHERS					

(Continue on separate sheet if necessary)

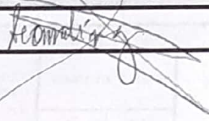
V. WORK EXPERIENCE

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

28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable) & STEP (Formal "00-07" INCREMENT)	STATUS OF APPOINTMENT	GOVT SERVICE (Y/ N)
From	To						
10/19/2018	03/16/2020	ASSOCIATE (1A)	Wipro BPO Philippines Ltd.	12,000.00	N/A	REGULAR	NO
11/24/2020	06/05/2021	REGISTRATION OFFICER 1	PHILIPPINE STATISTICS AUTHORITY	15,000.00	SG10	CONTRACTUAL	YES

(Continue on separate sheet if necessary)

SIGNATURE



DATE

August 2, 2021

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATIONS

[illegible]

(Continue on separate sheet if necessary)

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

[illegible]

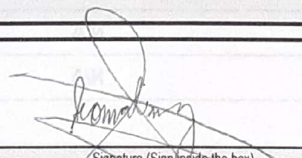
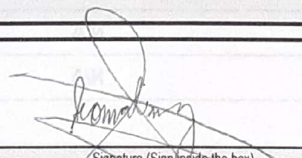
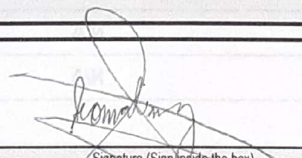






(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
SINGING	N/A	N/A
HOSTING	N/A	N/A
COMMUNICATION	N/A	

(Continue on separate sheet if necessary)

SIGNATURE	<i>[Signature]</i>	DATE	August 2, 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> <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 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>CRISYL COMPENDIO</td> <td>BAYBAY CITY, LEYTE</td> <td>9054241793</td> </tr> <tr> <td>MARIA KIM AURE</td> <td>BAYBAY CITY, LEYTE</td> <td>9228008135</td> </tr> <tr> <td>LOUISA MARIE ANDRADE</td> <td>BAYBAY CITY, LEYTE</td> <td>9060519933</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	CRISYL COMPENDIO	BAYBAY CITY, LEYTE	9054241793	MARIA KIM AURE	BAYBAY CITY, LEYTE	9228008135	LOUISA MARIE ANDRADE	BAYBAY CITY, LEYTE	9060519933
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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>													
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<p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 20px;"> <tr> <td style="height: 60px; text-align: center; vertical-align: bottom;">  Person Administering Oath </td> </tr> </table>		 Person Administering Oath											
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