

# 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.

1. CSID No.

(Do not fill up. For CSC use only)

## I. PERSONAL INFORMATION

2. SURNAME	NODALO		
FIRST NAME	CHYRIL MAE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	BONGHANYO		
3. DATE OF BIRTH (mm/dd/yyyy)	11/08/1997	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	BAYBAY CITY	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	17. RESIDENTIAL ADDRESS	0068 SAN VICENTE House/Block/Lot No. Street N/A POBLACION Subdivision/Village Barangay MAHAPLAG LEYTE City/Municipality Province 6512
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:	18. PERMANENT ADDRESS	0068 SAN VICENTE House/Block/Lot No. Street N/A POBLACION Subdivision/Village Barangay MAHAPLAG LEYTE City/Municipality Province 6512
7. HEIGHT (m)	1.59	19. TELEPHONE NO.	N/A
8. WEIGHT (kg)	51.5	20. MOBILE NO.	09510028168
9. BLOOD TYPE	B-	21. E-MAIL ADDRESS (if any)	chymmae08@gmail.com
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	12-02587401-4		
13. SSS NO.	N/A		
14. TIN NO.	N/A		
15. AGENCY EMPLOYEE NO.	N/A		

## 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	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	NODALO			
FIRST NAME	WENEFREDO			
MIDDLE NAME	VANZUELA			
25. MOTHER'S MAIDEN NAME	BONGHANYO			
SURNAME	BONGHANYO			
FIRST NAME	ELVIRA			
MIDDLE NAME	GUDEN			

(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	YEAR GRADUATED	SCHOLARS HIP/ ACADEMIC HONORS
			From	To			
ELEMENTARY	MAHAPLAG CENTRAL SCHOOL	PRIMARY	2004	2010	GRADUATED	2010	HONOR
SECONDARY	MAHAPLAG NATIONAL HIGHSCHOOL - LOWER	HIGHSCHOOL	2010	2014	GRADUATED	2014	HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY EDUCATION	2014	2019	GRADUATED	2019	NONE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)


SIGNATURE	DATE	07/02/2021
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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]

SIGNATURE		DATE	07/02/201
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## 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	
1. Name of the Program	
2. Description of the Program	
3. Date Attended	
4. Location	
5. Duration	
6. Facilitator	
7. Topics Covered	
8. Key Takeaways	
9. Application to Work	
10. Feedback	

[illegible]

(Continue on separate sheet if necessary)

#### VIII. OTHER INFORMATION

VIII. OTHER INFORMATION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	
LEADERSHIP	N/A	N/A
ORAL AND COMMUNICATION		
PROFICIENT IN USING COMPUTER		
MULTI-TASKING		
FLEXIBLE		
CREATIVE		
INTERPERSONAL		

(Continue on separate sheet if necessary)

SIGNATURE		DATE		07/02/2021
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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,

a. within the third degree? ☐ YES ☒ NO

b. within the fourth degree (for Local Government Unit - Career Employees)? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

35. a. Have you ever been found guilty of any administrative offense? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

b. Have you been criminally charged before any court? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

Date Filed: \_\_\_\_\_

Status of Case/s: \_\_\_\_\_

36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

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? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

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? ☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

39. Have you acquired the status of an immigrant or permanent resident of another country? ☐ YES ☒ NO

If YES, give details (country): \_\_\_\_\_

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:

a. Are you a member of any indigenous group? ☐ YES ☒ NO

If YES, please specify: \_\_\_\_\_

b. Are you a person with disability? ☐ YES ☒ NO

If YES, please specify ID No: \_\_\_\_\_

c. Are you a solo parent? ☐ YES ☒ NO

If YES, please specify ID No: \_\_\_\_\_

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
JOHANNY C. LLARENAS	MAHAPLAG, LEYTE	9264574126
ROMULO M. BERNAL	MAHAPLAG, LEYTE	9550759313
TERESITA I. CARTILLA	MAHAPLAG, LEYTE	9356362451

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.



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**

ID/License/Passport No.: **1866578**

Date/Place of Issuance: **01/29/2020/TACLOBAN CITY**

Signature (Sign inside the box)  
**JULY 02, 2021**  
Date Accomplished



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

**DAISY A. LLEVE**  
MUNICIPAL MAYOR

Person Administering Oath