

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	TABERNERO		
FIRST NAME	REALITY MAE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	SAYSON		
3. DATE OF BIRTH (mm/dd/yyyy)	7/10/1993	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	CEBU CITY	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	158 House/Block/Lot No. Street STO. NIÑO VILLAGE POBLACION DEL SUR Subdivision/Village Barangay VILLABA LEYTE City/Municipality Province
7. HEIGHT (m)		ZIP CODE	6537
8. WEIGHT (kg)			
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	158 House/Block/Lot No. Street STO. NIÑO VILLAGE POBLACION DEL SUR Subdivision/Village Barangay VILLABA LEYTE City/Municipality Province
10. GSIS ID NO.		ZIP CODE	6537
11. PAG-IBIG ID NO.	121169472892		
12. PHILHEALTH NO.	13-251035023-9		
13. SSS NO.		19. TELEPHONE NO.	
14. TIN NO.	328-607-600-000	20. MOBILE NO.	09298513040
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	ratioglegis1993@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	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	(+) TABERNERO			
FIRST NAME	ARTURO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	GALLARDE			
25. MOTHER'S MAIDEN NAME				
SURNAME	SAYSON			
FIRST NAME	CONSUELO			
MIDDLE NAME	CABALLERO		(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	VILLABA SOUTH CENTRAL SCHOOL	ELEMENTARY	1999	2005		2005	
SECONDARY	HOLY CHILD HIGH SCHOOL	SECONDARY	2005	2009		2009	
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A		N/A	
COLLEGE	UNIVERSITY OF CEBU - MAIN	BACHELOR OF ARTS IN POLITICAL SCIENCE	2009	2013		2013	
GRADUATE STUDIES	UNIVERSITY OF CEBU-BANILAD UNIVERSITY OF SOUTHERN PHILIPPINES	JURIS DOCTOR	2014 2016	2016 2017		ON-LEAVE	
	UNIVERSITY OF SAN JOSE-RECOLLETOS	MASTER OF ARTS IN POLITICAL SCIENCE	2020			ON GOING	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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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> <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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: center;">END OF CONTRACT</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>DR. LESLIE ANNE LIWANAG, Ph.D</td> <td>VISAYAS STATE UNIVERSITY</td> <td>0920 819 3777</td> </tr> <tr> <td>DR. CYRIL AMANTE-BUTA, MPA, DPA</td> <td>BUKIDNON STATE UNIVERSITY</td> <td>0947 562 9685</td> </tr> <tr> <td>MS. GERNAH MAY SANTIANES</td> <td>VISAYAS STATE UNIVERSITY</td> <td>0951 464 5396</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	DR. LESLIE ANNE LIWANAG, Ph.D	VISAYAS STATE UNIVERSITY	0920 819 3777	DR. CYRIL AMANTE-BUTA, MPA, DPA	BUKIDNON STATE UNIVERSITY	0947 562 9685	MS. GERNAH MAY SANTIANES	VISAYAS STATE UNIVERSITY	0951 464 5396
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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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<div style="text-align: center;">  <p>PHOTO</p> </div> <div style="border: 1px solid black; height: 100px; width: 100%; margin-top: 10px;"></div> <p style="text-align: center;">Right Thumbmark</p>													
<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; width: 300px; height: 60px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>													