

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	POLE		
FIRST NAME	LUCIO	NAME EXTENSION (JR., SR) JR.	
MIDDLE NAME	CARTA		
3. DATE OF BIRTH (mm/dd/yyyy)	07/23/1973	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	BAYBAY, 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 type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:		
7. HEIGHT (m)	5'5"	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street HIPUSNGO Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
8. WEIGHT (kg)	64kg	ZIP CODE	6521-A
9. BLOOD TYPE	"O"	18. PERMANENT ADDRESS	HIPUSNGO House/Block/Lot No. Street BAYBAY LEYTE Subdivision/Village Barangay
10. GSIS ID NO.	200-47968-98	ZIP CODE	City/Municipality Province
11. PAG-IBIG ID NO.	916-195161-091		6521-A
12. PHILHEALTH NO.	13-200413033-6		
13. SSS NO.	3339426129	19. TELEPHONE NO.	N/A
14. TIN NO.	947-762-563	20. MOBILE NO.	0926-556474
15. AGENCY EMPLOYEE NO.	NONE	21. E-MAIL ADDRESS (if any)	N/A

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	POLE		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ANGELITA	NAME EXTENSION (JR., SR)	ALLANA MAE P. POLE	12/18/2002
MIDDLE NAME	OMAPAS		JUNJIE P. POLE	01/27/1999
OCCUPATION	HOUSEWIFE		ANGELICA P. POLE	03/25/1997
EMPLOYER/BUSINESS NAME	N/A		ARDE JOHN P. POLE	11/08/1995
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	POLE			
FIRST NAME	LUCIO	NAME EXTENSION (JR., SR) JR.		
MIDDLE NAME	NEMENCIO			
25. MOTHER'S MAIDEN NAME				
SURNAME	CARTA			
FIRST NAME	EUSTQUIA			
MIDDLE NAME	FLORES	(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	HIPUSNGO ELEMENTARY SCHOOL	PRIMARY EDUCATION	1981	1987	GRADUATED	1987	N/A
SECONDARY	BAYBAY HIGH SCHOOL	SECONDARY EDUCATION GRADUATE	1987	1991	GRADUATED	1991	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	N/A	N/A	N/A	N/A	N/A	N/A	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	July 9, 2024

#### IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(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>	July 9, 2024
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## VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[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

[illegible]

**(Continue on separate sheet if necessary)**

<b>SIGNATURE</b>		<b>DATE</b>	July 9, 2024
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