

## 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	Dumaguing		
FIRST NAME	Jennifer	NAME EXTENSION (JR, SR)	
MIDDLE NAME	Capacio		
3. DATE OF BIRTH (mm/dd/yyyy)	04/03/1979	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, Leyte	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"/> Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street Zone 3 Nangka Brgy. Guadalupe Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
7. HEIGHT (m)	1.56	ZIP CODE	6521
8. WEIGHT (kg)	65 kgs.	18. PERMANENT ADDRESS	House/Block/Lot No. Street Zone 3 Nangka Brgy. Guadalupe Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
9. BLOOD TYPE	O+	ZIP CODE	6521
10. GSIS ID NO.		19. TELEPHONE NO.	
11. PAG-IBIG ID NO.	121031630096	20. MOBILE NO.	09621 1741 12
12. PHILHEALTH NO.	14083700001	21. E-MAIL ADDRESS (if any)	<a href="mailto:orangeleiz@gmail.com">orangeleiz@gmail.com</a>
13. SSS NO.	0722328976		
14. TIN NO.	249600050		
15. AGENCY EMPLOYEE NO.			

### II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NAME EXTENSION (JR, SR)	Phoebe Joyce D. Palencia	02/29/2000
MIDDLE NAME		Mae Aljen D. Palencia	05/30/2003
OCCUPATION		Juliana Charlize D. Palencia	08/18/2004
EMPLOYER/BUSINESS NAME		Pedro Anthony Dumaguing	07/22/2011
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME	Dumaguing		
FIRST NAME	Antonio	NAME EXTENSION (JR, SR)	
MIDDLE NAME	Ybaliez		
25. MOTHER'S MAIDEN NAME			
SURNAME	Capacio		
FIRST NAME	Zenaida		
MIDDLE NAME	Calungod		

(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	VSCA Foundation Elementary School	Primary	11/06/1988	24/03/1992		1992	1st Honorable Mention
SECONDARY	VSCA Laboratory High School	Secondary	14/06/1992	24/03/1996		1996	With Honors
VOCATIONAL / TRADE COURSE							
COLLEGE	University of San Jose-Recoletos	Bachelor of Science in Tourism	11/06/1996	16/10/1999		1999	
GRADUATE STUDIES	Southern Leyte State University	Masters in Management	20/01/2024	present		on going	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	June 28, 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	
1. Name of the program	2. Description of the program
3. Name of the program	4. Description of the program
5. Name of the program	6. Description of the program
7. Name of the program	8. Description of the program
9. Name of the program	10. Description of the program
11. Name of the program	12. Description of the program
13. Name of the program	14. Description of the program
15. Name of the program	16. Description of the program
17. Name of the program	18. Description of the program
19. Name of the program	20. Description of the program
21. Name of the program	22. Description of the program
23. Name of the program	24. Description of the program
25. Name of the program	26. Description of the program
27. Name of the program	28. Description of the program
29. Name of the program	30. Description of the program
31. Name of the program	32. Description of the program
33. Name of the program	34. Description of the program
35. Name of the program	36. Description of the program
37. Name of the program	38. Description of the program
39. Name of the program	40. Description of the program
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53. Name of the program	54. Description of the program
55. Name of the program	56. Description of the program
57. Name of the program	58. Description of the program
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77. Name of the program	78. Description of the program
79. Name of the program	80. Description of the program
81. Name of the program	82. Description of the program
83. Name of the program	84. Description of the program
85. Name of the program	86. Description of the program
87. Name of the program	88. Description of the program
89. Name of the program	90. Description of the program
91. Name of the program	92. Description of the program
93. Name of the program	94. Description of the program
95. Name of the program	96. Description of the program
97. Name of the program	98. Description of the program
99. Name of the program	100. Description of the program

[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)
Computer Skill: MS Office Application		
Student Assessment and Evaluation		
Classroom Management		
Market Research		
Strong Negotiation Skills		
Singing/Playing Badminton		
Cooking		

Continue on separate sheet if necessary.

SIGNATURE		DATE	June 28, 2024
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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="margin-left: 40px;">Date Filed: _____</p> <p style="margin-left: 40px;">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: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>Dr. Jose L. Bacusmo</td> <td>Sta. Cruz, Baybay City, Leyte</td> <td>9686906880</td> </tr> <tr> <td>Dr. Czarina Anocella G. Gabi</td> <td>Sogod, Southern Leyte</td> <td>9173088375</td> </tr> <tr> <td>Prof. Ed Allan L. Alcober</td> <td>Gabas, Baybay City, Leyte</td> <td>9483696506</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Dr. Jose L. Bacusmo	Sta. Cruz, Baybay City, Leyte	9686906880	Dr. Czarina Anocella G. Gabi	Sogod, Southern Leyte	9173088375	Prof. Ed Allan L. Alcober	Gabas, Baybay City, Leyte	9483696506
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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>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="font-size: small;">Government Issued ID (ePassport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td style="font-size: small;">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government issued ID: <u>Passport</u></td> </tr> <tr> <td>ID/License/Passport No.: <u>P8524459B</u></td> </tr> <tr> <td>Date/Place of Issuance: <u>20/12/2021/ Bangkok</u></td> </tr> </table>	Government Issued ID (ePassport, GSIS, SSS, PRC, Driver's License, etc.)	PLEASE INDICATE ID Number and Date of Issuance	Government issued ID: <u>Passport</u>	ID/License/Passport No.: <u>P8524459B</u>	Date/Place of Issuance: <u>20/12/2021/ Bangkok</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; height: 60px; vertical-align: middle;"> </td> </tr> <tr> <td style="text-align: center; font-size: small;">Signature (Sign inside the box)</td> </tr> <tr> <td style="text-align: center;">28/06/2024</td> </tr> <tr> <td style="text-align: center; font-size: small;">Date Accomplished</td> </tr> </table>		Signature (Sign inside the box)	28/06/2024	Date Accomplished	<div style="text-align: center;">   <small>PHOTO</small> </div> <div style="border: 1px solid black; height: 80px; margin-top: 10px;"></div> <div style="text-align: center; font-size: small;">Right Thumbmark</div>		
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28/06/2024													
Date Accomplished													
<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: 200px; height: 60px; margin: 10px auto;"></div> <div style="text-align: center; font-size: small; border: 1px solid black; width: 150px; margin: 5px auto; padding: 2px;">             Person Administering Oath         </div>													