

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	ANOJAN		
FIRST NAME	CHANDIE	NAME EXTENSION (JR., SR.) N/A	
MIDDLE NAME	RELENTE		
3. DATE OF BIRTH (mm/dd/yyyy)	06/08/1993	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	PALOMPON, 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 checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	N/A F. PASTOR ST. House/Block/Lot No Street N/A POBLACION Subdivision/Village Barangay TABANGO LEYTE City/Municipality Province
7. HEIGHT (m)	1.7	ZIP CODE	6536
8. WEIGHT (kg)	105		
9. BLOOD TYPE	B	18. PERMANENT ADDRESS	N/A F. PASTOR ST. House/Block/Lot No Street N/A POBLACION Subdivision/Village Barangay TABANGO LEYTE City/Municipality Province
10. QSIS ID NO	2006008813	ZIP CODE	6536
11. PAG-IBIG ID NO	121148721652		
12. PHILHEALTH NO	130254851044		
13. SSS NO	3451865273	19. TELEPHONE NO	N/A
14. TIN NO	711616094	20. MOBILE NO	0947-521-0571
15. AGENCY EMPLOYEE NO	SC-060893	21. E-MAIL ADDRESS (if any)	chanojan.pit@gmail.com

II. FAMILY BACKGROUND

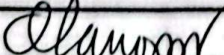
22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR.) N/A	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO	N/A			
24. FATHER'S SURNAME	ANOJAN			
FIRST NAME	GENARO	NAME EXTENSION (JR., SR.) JR.		
MIDDLE NAME	PUNO			
25. MOTHER'S MAIDEN NAME				
SURNAME	BALUNAN			
FIRST NAME	MA. MYRLA			
MIDDLE NAME	RELENTE			

(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	TABANGO CENTRAL SCHOOL	PRIMARY EDUCATION	2001	2006	N/A	2006	SECOND HONORABLE
SECONDARY	MARCELINO R. VELOSO NATIONAL HIGH SCHOOL	HIGH SCHOOL	2006	2009	N/A	2009	VALENTORIAN
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	SAINT PAUL SCHOOL OF BUSINESS AND LAW	BACHELOR OF SCIENCE IN ACCOUNTANCY	2009	2014	N/A	2014	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A


(Continue on separate sheet if necessary)

SIGNATURE		DATE	March 21, 2025
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27	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	CERTIFIED PUBLIC ACCOUNTANT	77.14	05/24/2015	MANILA	0162619	06/08/2026
	DRIVER'S LICENSE	PASSED	04/08/2019	ORMOC CITY	H03-19-001512	06/08/2033

V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	March 21, 2025
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

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

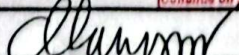
30	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/SPONSORED BY (Write in full)
		From	To			
	Gender Sensitivity Training	12/06/2024	12/06/2024	8.0	Technical	Palompon Institute of Technology Tabango
	Laws and Regulations on Government Expenditures	09/16/2024	09/19/2024	32.0	Technical	Commission on Audit ROVIII
	ASEAN CPAs and ASEAN MRAs...the Opportunities for Filipino CPAs	09/23/2023	09/23/2023	3.0	Technical	Philippine Institute of Certified Public Accountants
	EWT and FWT: Deciphering Withholding Taxes on Local and Non-Resident Suppliers	09/21/2023	09/21/2023	2.0	Technical	Philippine Institute of Certified Public Accountants
	44th GACPA Annual National Convention and Seminar	05/24/2023	05/26/2023	14.0	Technical	Government Association of Certified Public Accountants, Inc.
	Seminar on the 2017 Rules on Administrative Cases in the Civil Service (2017 RACCS)	04/20/2022	04/21/2022	16.0	Technical	Civil Service Commission Regional Office VIII
	18th Basic Non-Life Insurance Course	09/16/2019	09/24/2019	40.0	Technical	Insurance Institute for Asia and the Pacific, Inc.
	Workshop on Financial and Accounting Standards for Non-Profits	04/25/2019	04/26/2019	16.0	Technical	League of Corporate Foundations
	PICPA Eastern Visayas Regional Conference (EVRG) Theme: Shine Eastern Visayas	03/02/2018	03/03/2018	11.5	Technical	Philippine Institute of Certified Public Accountants

(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)
	ACCOUNTS RECONCILIATION		N/A		PHILIPPINE INSTITUTE OF CERTIFIED ACCOUNTANTS (PICPA)
					GOVERNMENT ASSOCIATION OF CERTIFIED ACCOUNTANTS (GACPA)
					ASSOCIATION OF ADMINISTRATIVE PERSONNEL OF PIT (AAPIT)

(Continue on separate sheet if necessary)

SIGNATURE		DATE	March 21, 2025
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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?

b. within the fourth degree (for Local Government Unit - Career Employees)?

☐ YES ☒ NO

☐ 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: FINISHED CONTRACT

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.
ATTY. JAZMINE V. BENIGAY	LEYTE INDUSTRIAL DEVELOPMENT ESTATE, PASAR, ISABEL, LEYTE	0917-273-7853
FLORAMIE M. CABERO	TUNGA-TUNGA, OMAGANHAN, TABANGO, LEYTE	0927-583-1472
MARYBAMBA A. GASTADOR	TINIBGAN, BIASONG, SAN ISIDRO, LEYTE	0907-550-9444

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.



CHANDIE R. OCHOA

PHOTO

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**

ID/License/Passport No.: **0162619**

Date/Place of Issuance: **05/27/2015 Manila**

Chandie R. Ochoa

Signature (Sign inside the box)

March 21, 2025

Date Accomplished



Right Thumbprint

SUBSCRIBED AND SWORN to before me this MAR 24 2025, affiant exhibiting his/her validly issued government ID as indicated above.

[Signature]

Dennis M. Del Pilar

President

Person Administering Oath