

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.

CS ID No.

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	ORTEGA		
FIRST NAME	CYRELL APPLE		NAME EXTENSION (JR., SR.)
MIDDLE NAME	COSTA		
3. DATE OF BIRTH (mm/dd/yyyy)	3/19/97	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	BURAUEN, 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"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	PATERNO EXTENSION
7. HEIGHT (m)	1.58 m.	ZIP CODE	House/Block/Lot No. Street
8. WEIGHT (kg)	79 kg.		BRGY 25
9. BLOOD TYPE	B		Subdivision/Village Barangay
10. GSIS ID NO.	N/A		TACLOBAN CITY LEYTE
11. PAG-IBIG ID NO.	N/A	City/Municipality Province	8500
12. PHILHEALTH NO.	13-250390531-4	18. PERMANENT ADDRESS	
13. SSS NO.	347-955-9176	House/Block/Lot No. Street	BRGY MAGHUBAS
14. TIN NO.	747-848-587	Subdivision/Village Barangay	LEYTE
15. AGENCY EMPLOYEE NO.	N/A	City/Municipality Province	8516
		19. TELEPHONE NO.	N/A
		20. MOBILE NO.	09982964636
		21. E-MAIL ADDRESS (if any)	ortegacyrellapple@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	
MIDDLE NAME	N/A		N/A	
OCCUPATION	N/A		N/A	
EMPLOYER/BUSINESS NAME	N/A		N/A	
BUSINESS ADDRESS	N/A		N/A	
TELEPHONE NO.	N/A		N/A	
24. FATHER'S SURNAME	ORTEGA		N/A	
FIRST NAME	CARLOS	NAME EXTENSION (JR., SR.)	N/A	
MIDDLE NAME	SAMORAY		N/A	
25. MOTHER'S MAIDEN NAME			N/A	
SURNAME	COSTA		N/A	
FIRST NAME	ABELLA		N/A	
MIDDLE NAME	CONCORDO		(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	BURAUEN NORTH CENTRAL SCHOOL	PRIMARY EDUCATION	/2003	/2009		2009	
SECONDARY	LICEO DEL VERBO DIVINO	SECONDARY SCHOOL	/2009	/2013		2013	
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A		N/A	
COLLEGE	ST. PAUL SCHOOL OF PROFESSIONAL STUDIES	BS ACCOUNTING TECHNOLOGY	2013/2017	2015/2019		2019	
GRADUATE STUDIES	N/A	N/A					

(Continue on separate sheet if necessary)

SIGNATURE

Ortega

DATE

09 / 27 / 2021

[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	
[Signature]		09/27/2021	

29. NAME & ADDRESS OF ORGANIZATION

(Continue on separate sheet if necessary.)

30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)

(Continue on separate sheet if necessary)

31. SPECIAL SKILLS and HOBBIES

(Continue on separate sheet if necessary)

Qinghai

DATE _____

09/27/2021

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?
b. Have you been criminally charged before any court?

☐ YES ☒ NO
If YES, give details: _____
☐ 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)?
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: _____
☐ 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?
b. Are you a person with disability?
c. Are you a solo parent?

☐ YES ☒ NO
If YES, please specify: _____
☐ YES ☒ NO
If YES, please specify ID No: _____
☐ YES ☒ NO
If YES, please specify ID No: _____

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

NAME	ADDRESS	TEL. NO.
ASHTIN VEA GRANALI	TACLOBAN CITY	9151827646
MARIDHEN CALIXTRO	PALO, LEYTE	9192075220
EDUARD JAYSON CONCHADA	PALO, LEYTE	9186409989

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.



CYRELL APPLE C. ORTEGA

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: PASSPORT
ID/License/Passport No.: P6964302A
Date/Place of Issuance: APRIL 27, 2018/DFA TACLOBAN

Signature (Sign inside the box)
6/27/2021
Date Accomplished

Right Thumbmark

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

Person Administering Oath