

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	GRABINO		
FIRST NAME	LORELIE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ALMACEN		
3. DATE OF BIRTH (mm/dd/yyyy)	6/21/2001	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	MAASIN CITY, SOUTHERN 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	<div>N/A</div> <div>PUROK CAIMITO</div> <div>House/Block/Lot No. Street</div> <div>N/A ASUNCION</div> <div>Subdivision/Village Barangay</div> <div>MAASIN CITY SOUTHERN LEYTE</div> <div>City/Municipality Province</div> <div>6600</div>
7. HEIGHT (m)	1.48	ZIP CODE	
8. WEIGHT (kg)	45		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	<div>NA</div> <div>PUROK CAIMITO</div> <div>House/Block/Lot No. Street</div> <div>N/A N/A</div> <div>Subdivision/Village Barangay</div> <div>MAASIN CITY SOUTHERN LEYTE</div> <div>City/Municipality Province</div> <div>6600</div>
10. GSIS ID NO.	N/A	ZIP CODE	
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	13-251667525-3		
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A
14. TIN NO.	625-271-358-00000	20. MOBILE NO.	0970 997 6681
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	loreliealmacengrabino@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	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	GRABINO			
FIRST NAME	JULIUS	NAME EXTENSION (JR., SR)		
MIDDLE NAME				
25. MOTHER'S MAIDEN NAME	FLORENCIA TANO ALMACEN			
SURNAME	GRABINO			
FIRST NAME	FLORENCIA			
MIDDLE NAME	ALMACEN		(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	MAASIN CENTRAL SCHOOL	ELEMENTARY	2007	2014	GRADUATE	2014	1ST HONORABLE MENTION
SECONDARY	THE COLLEGE OF MAASIN	HIGHSCHOOL	2014	2020	GRADUATE	2020	WITH HONOR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN DEVELOPMENT COMMUNICATION	2020	2024	GRADUATE	2024	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	JANUARY 20, 2025
-----------	---	------	------------------

#### 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>	JANUARY 20, 2025
------------------	---	-------------	------------------

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			
	DEVELOPMENT COMMUNICATOR'S SOCIETY (DECSO) VISAYAS STATE UNIVERSITY, BAYBAY CITY, LEYTE	3/22/2024	3/22/2024	3.0	MEMBER OF THE WORKING COMMITTEE	
	ASSOCIATION OF DEVELOPMENT COMMUNICATION EDUCATORS AND PRACTITIONERS (ADCEP)	7/14/2023	7/16/2023	30.0	MEMBER OF THE PROGRAM COMMITTEE	
(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			
	WRITESHOP ON PEER REVIEWING JOURNALS	11/25/202	11/26/2024	8.0	Technical	Research, Innovation and Extension Services - Southern Leyte State University
	POLISHING OF RESEARCH AND NON-METHOD PAPERS FOR PUBLICATION	12/11/2024	12/11/2024	16.0	Technical	Research, Innovation and Extension Services - Southern Leyte State University
	CRITIQUING PAPERS OF BIBLIOMETRIC AND COMMENTARY PAPERS	10/28/2024	10/28/2024	16.0	Technical	Research, Innovation and Extension Services - Southern Leyte State University
	COMPUTER SKILLS ENHANCEMENT TRAINING	10/28/2024	10/29/2024	4.0	Technical	Office of Human Reesource Management and Development - Southern Leyte State University
	WORKSHOP ON BIBLIOMETRIC ANALYSIS AND VISUALIZATION ON VOS VIEWER	10/24/2024	10/24/2024	8.0	Technical	Research, Innovation and Extension Services - Southern Leyte State University
	INTENSIVE WORKSHOP ON FOR JOURNAL PUBLICATION	10/23/2024	10/23/2024	6.0	Technical	Research, Innovation and Extension Services - Southern Leyte State University
	OPTIMIZING BIBLIOMETRIC RESEARCH AND SCOPUS DATA ACQUISITION FOR COMPREHENSIVE WRITE-UPS	9/3/2024	9/3/2024	6.0	Technical	Research, Innovation and Extension Services - Southern Leyte State University
	WRITESHOP ON COMMENTARY FOR JOURNAL PUBLICATION	8/21/2024	8/21/2024	4.0	Technical	Research, Innovation and Extension Services - Southern Leyte State University
	VIDEO PRODUCTION WORKSHOP	2/25/2023	2/25/2023	3.0	Technical	Development Communicator's Society
	AUDIO PRODUCTION WORKSHOP	2/22/2023	2/22/2023	2.0	Technical	Development Communicator's Society
	ABS-CBN PINOY MEDIA CONGRESS CARAVAN	3/12/2022	3/12/2022	8.0	Technical	ABS-CBN and Philippine Association of Communication Educators
(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)	
	Hosting					
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	JANUARY 20, 2025	

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)?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
35. a. Have you ever been found guilty of any administrative offense?  b. Have you been criminally charged before any court?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>												
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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)														
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>DR. JUDE NONIE A. SALES</td><td>BAYBAY CITY, LEYTE</td><td>0917 300 5081</td></tr><tr><td>MR. GEMAR B. MORI</td><td>MAASIN CITY, SOUTHERN LEYTE</td><td>0995 427 4239</td></tr><tr><td>MS. TRIXIA JAYNE A. BACULFO</td><td>MAASIN CITY, SOUTHERN LEYTE</td><td>0927 334 9585</td></tr></table>			NAME	ADDRESS	TEL. NO.	DR. JUDE NONIE A. SALES	BAYBAY CITY, LEYTE	0917 300 5081	MR. GEMAR B. MORI	MAASIN CITY, SOUTHERN LEYTE	0995 427 4239	MS. TRIXIA JAYNE A. BACULFO	MAASIN CITY, SOUTHERN LEYTE	0927 334 9585
NAME	ADDRESS	TEL. NO.												
DR. JUDE NONIE A. SALES	BAYBAY CITY, LEYTE	0917 300 5081												
MR. GEMAR B. MORI	MAASIN CITY, SOUTHERN LEYTE	0995 427 4239												
MS. TRIXIA JAYNE A. BACULFO	MAASIN CITY, SOUTHERN LEYTE	0927 334 9585												
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.		<div></div> <div>PHOTO</div>												
<div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: TIN ID</div> <div>ID/License/Passport No.: 625-271-358-00000</div> <div>Date/Place of Issuance: 25-APR-2023</div>	<div></div> <div>Signature (Sign inside the box)</div> <div>JANUARY 20, 2025</div> <div>Date Accomplished</div>	<div></div> <div>Right Thumbmark</div>												
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.														
<div></div> <div>Person Administering Oath</div>														