

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	CAJUDO		
FIRST NAME	RONALYN	NAME EXTENSION (JR, SR)	
MIDDLE NAME	GATELA		
3. DATE OF BIRTH (mm/dd/yyyy)	02/28/1997	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	SAN MIGUEL 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	N/A ZONE 1 House/Block/Lot No. Street N/A CABATIANUHAN Subdivision/Village Barangay SAN MIGUEL LEYTE City/Municipality Province
7. HEIGHT (m)	5'3	ZIP CODE	6518
8. WEIGHT (kg)	65	18. PERMANENT ADDRESS	N/A ZONE 1 House/Block/Lot No. Street N/A CABATIANUHAN Subdivision/Village Barangay SAN MIGUEL LEYTE City/Municipality Province
9. BLOOD TYPE	"O"	ZIP CODE	6518
10. QGIS ID NO.	N/A	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	121213647099	20. MOBILE NO.	09104457726
12. PHILHEALTH NO.	1302-5488-5135	21. E-MAIL ADDRESS (if any)	ronalyncajudo@gmail.com
13. SSS NO.	06-4049898-8		
14. TIN NO.	761-809-549		
15. AGENCY EMPLOYEE NO.	N/A		

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		NAME EXTENSION (JR, SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	CAJUDO			
FIRST NAME	ROLAND	NAME EXTENSION (JR, SR)		
MIDDLE NAME	ROMAWAK			
25. MOTHER'S MAIDEN NAME				
SURNAME	GATELA			
FIRST NAME	ERLINDA			
MIDDLE NAME	DOQUE			

(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	CABATIANUHAN ELEMENTARY SCHOOL	ELEMENTARY	06/05/2004	03/24/2009	N/A	2009	N/A
SECONDARY	SAN MIGUEL NATIONAL HIGH SCHOOL	HIGH SCHOOL	06/09/2009	03/28/2013	N/A	2013	N/A
VOCATIONAL / TRADE COURSE	VILLA CONZIOLO FARM SCHOOL	AGRICULTURAL CROP PRODUCTION	12/23/2019	01/31/2020	N/A	2020	FULL SCHOLARS
COLLEGE	LEYTE NORMAL UNIVERSITY	BACHELOR OF SECONDARY EDUCATION MAJOR IN SOCIAL STUDIES	06/10/2014	05/23/2019	N/A	2019	CHED SCHOLAR
GRADUATE STUDIES	EASTERN SAMAR STATE UNIVERSITY GRADUATE SCHOOL	MASTERS OF EDUCATION IN SOCIAL SCIENCE	08/23/2021	PRESENT	24 UNITS	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE	DATE	06/07/2022
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IV. CIVIL SERVICE ELIGIBILITY			DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	NUMBER	Validity
27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)				
	NAPOLCOM	74.06%	11/27/2021	TACLOBAN CITY		
	LET (RA 1080)	82.20%	03/27/2022	TACLOBAN CITY	1912175	02/28/1997

(Continue on separate sheet if necessary)

... 4. Experience sheet.

V. WORK EXPERIENCE				SALARY/ JOB PAY GRADE (if)	STATUS OF	GOVT SERVICE
(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)		
SIGNATURE	DATE	06/07/2022

29. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

NAME & ADDRESS OF ORGANIZATION
(Write in full)

INCLUSIVE DATES
(mm/dd/yyyy)

NUMBER OF HOURS

POSITION / NATURE OF WORK

From

To

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

"INTERFACING BRAIN-BASED LEARNING WITH TRANSFORMATIVE TEACHING FOR NEXTGEN LEARNERS IN ARLING PANLIPUNAN"

03/09/2019

8 HOURS

N/A

PHOENIX PUBLISHING HOUSE

"INTERFACING BRAIN-BASED LEARNING WITH TRANSFORMATIVE TEACHING FOR NEXTGEN LEARNERS IN HUMSS"

03/10/2019

03/10/2019

8 HOURS

N/A

PHOENIX PUBLISHING HOUSE

NATIONAL SEMINAR-WORKSHOP ON 21ST CENTURY TEACHING AND LEARNING

08/17/2019

08/17/2019

8 HOURS

N/A

GEENED CTRC

CERTIFICATE OF TRAINING COMPLETED THE PROGRAM IN ORGANIC AGRICULTURE PRODUCTION NC II

12/23/2019

01/31/2020

232 HOURS

N/A

VILLACONZOILO FARM SCHOOL

CERTIFICATE OF TRAINING COMPLETED THE COMPETENCY REQUIREMENTS OF A FULL QUALIFICATION IN TRAINERS METHODOLOGY LEVEL 1

09/01/2020

10/15/2020

264 HOURS

NA

SAMAR NATIONAL SCHOOL OF ARTS AND TRADES

8TH INTERNATIONAL CONFERENCE ON INTEGRATIVE DISASTER RISK REDUCTION MANAGEMENT

11/10/2021

11/11/2021

18 Hours

N/A

EASTERN SAMAR STATE UNIVERSITY

"Impact Assessment of Funded Researches"

10/22/2021

10/22/2021

8 HOURS

N/A

Eastern Visayas Consortium for Industry, Energy, and Emerging Technology Research and Development

"Project Monitoring and Evaluation"

10/21/2021

10/21/2021

8 HOURS

N/A

Eastern Visayas Consortium for Industry, Energy, and Emerging Technology Research and Development

(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 LITERATE

ARMY RESERVED COMMAND

ARMY RESERVED COMMAND

(Continue on separate sheet if necessary)

SIGNATURE

DATE

06/07/2022

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.
SR. MERLINDA B. PADERES, OND	NOTRE DAME OF JARO, INC	9295889132
MANUEL AFABLE	SAMAR NATIONAL SCHOOL OF ARTS AND TRADES	9153550602
KIM JAYSON CORTON	STA. CRUZ NATIONAL HIGH SCHOOL	9355913902

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.



RONALYN G. CAJUDO

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

Government Issued ID: PRC

ID/License/Passport No.: 1912175

Date/Place of Issuance: TACLOBAN CITY

Signature (Sign inside the box)

06/07/2022
Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this

JUN 07 2022

, affiant exhibiting his/her validly issued government ID as indicated above.

VA MANUEL C. GARCIA
CLERK JR. P.O. 15

Person Administering Oath