

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	MECATE		
FIRST NAME	YASSER		NAME EXTENSION (JR., SR)
MIDDLE NAME	LIM		
3. DATE OF BIRTH (mm/dd/yyyy)	10/31/2000	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	MARIKINA CITY	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	ESCANIO House/Block/Lot No. Street SANTO NIÑO Subdivision/Village Barangay SAN JUAN (CABALIAN) SOUTHERN LEYTE City/Municipality Province
7. HEIGHT (m)	1.70	ZIP CODE	
8. WEIGHT (kg)	75		
9. BLOOD TYPE	0	18. PERMANENT ADDRESS	ESCANIO House/Block/Lot No. Street SANTO NIÑO Subdivision/Village Barangay SAN JUAN (CABALIAN) SOUTHERN LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6611
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	13-202849848-2	19. TELEPHONE NO.	
13. SSS NO.	06-4611540-1	20. MOBILE NO.	09164079287
14. TIN NO.	631-774-739-00000	21. E-MAIL ADDRESS (if any)	yasser.mecate@gmail.com
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	MECATE			
FIRST NAME	RICARDO	NAME EXTENSION (JR., SR) JR		
MIDDLE NAME	GABIA			
25. MOTHER'S MAIDEN NAME				
SURNAME	LIM			
FIRST NAME	CATHERINE			
MIDDLE NAME	ATIBAGOS		(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	San Juan Central Elementary School	ELEMENTARY	2004	2013		2013	
SECONDARY	Southern Leyte State University- San Juan Campus	SENIOR HIGH SCHOOL	2017	2019		2019	DOST SCHOLARSHIP
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	Southern Leyte State University- San Juan Campus	BACHELOR OF SECONDARY EDUCATION (BSED) MAJOR IN SCIENCE	2019	2023		2023	MAGNA CUM LAUDE
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	August 15, 2023
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[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	8/15/2023
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[illegible]

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

[illegible]

VIII. OTHER INFORMATION

[illegible]

SIGNATURE		DATE	8/15/2023
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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> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>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: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>Rina Ligaya D. Merquita (School Principal)</td> <td>San Roque, San Juan, Southern Leyte</td> <td>0912-895-2143</td> </tr> <tr> <td>Mayra Vi L. Castulo (Head of Department of Science Education)</td> <td>Sto. Nino, San Juan, Southern Leyte</td> <td>0960-662-5621</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Rina Ligaya D. Merquita (School Principal)	San Roque, San Juan, Southern Leyte	0912-895-2143	Mayra Vi L. Castulo (Head of Department of Science Education)	Sto. Nino, San Juan, Southern Leyte	0960-662-5621			
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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="background-color: #f2f2f2;">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td>PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID: National ID</td> </tr> <tr> <td>ID/License/Passport No.: 2305-1874-2938-0281</td> </tr> <tr> <td>Date/Place of Issuance: 28 SEPTEMBER, 2022</td> </tr> </table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)	PLEASE INDICATE ID Number and Date of Issuance	Government Issued ID: National ID	ID/License/Passport No.: 2305-1874-2938-0281	Date/Place of Issuance: 28 SEPTEMBER, 2022	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 100px; vertical-align: bottom; text-align: center;">Signature (Sign inside the box)</td> </tr> <tr> <td style="text-align: center;">Date Accomplished</td> </tr> </table>	Signature (Sign inside the box)	Date Accomplished					
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<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: 300px; height: 60px; margin: 10px auto; text-align: center; padding-top: 5px;"> Person Administering Oath </div>													

ID picture taken within the last 6 months
4.5 cm. X 3.5 cm
(passport size)

Computer generated
or photocopied picture
is not acceptable

PHOTO

Right Thumbmark