

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. GS ID No.

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	ANOOS		
FIRST NAME	MARY ROCHELLE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	CERVANTES	N/A	
3. DATE OF BIRTH (mm/dd/yyyy)	12/20/1995	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	ORMOC CITY, LEYTE	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		Pls. indicate country:
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	
7. HEIGHT (m)	1.626m	House/Block/Lot No.	Street
8. WEIGHT (kg)	50kg	Subdivision/Village	BRGY. LILOAN
9. BLOOD TYPE	O	ORMOC CITY	Barangay
10. GSIS ID NO.	N/A	City/Municipality	LEYTE
11. PAG-IBIG ID NO.	1211-8858-6588	ZIP CODE	Province
12. PHILHEALTH NO.	132507248342		6541
13. SSS NO.	06-3668251-7	18. PERMANENT ADDRESS	
14. TIN NO.	328-849-847	House/Block/Lot No.	Street
15. AGENCY EMPLOYEE NO.	N/A	Subdivision/Village	BRGY. LILOAN
		ORMOC CITY	Barangay
		City/Municipality	LEYTE
		ZIP CODE	Province
			6541
		19. TELEPHONE NO.	N/A
		20. MOBILE NO.	09286653203/ 09551581743
		21. E-MAIL ADDRESS (if any)	rochelleanoos@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	ANOOS			
FIRST NAME	ROY	NAME EXTENSION (JR., SR)		
MIDDLE NAME	VILLAYER			
25. MOTHER'S MAIDEN NAME				
SURNAME	CERVANTES			
FIRST NAME	CHERYL			
MIDDLE NAME	BOHOL			

(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	ORMOC CITY CENTRAL SPED CENTER	ELEMENTARY GRADUATE	2001	2007		2007	N/A
SECONDARY	NEW ORMOC CITY NATIONAL HIGH SCHOOL	HIGH SCHOOL GRADUATE	2007	2011		2011	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A		N/A	N/A
COLLEGE	ST. PETER'S COLLEGE OF ORMOC, INC.	BACHELOR OF SCIENCE IN ACCOUNTANCY	2017	2018		2018	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A		N/A	N/A

SIGNATURE

DATE

[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE

DATE _____


[illegible]

		(Continue on separate sheet if necessary)	
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED			

[illegible]

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
ANALYTICAL SKILLS	N/A	N/A
COMPUTER LITERATE		
KNOWLEDGEABLE IN ACCOUNTING		
PROFICIENT IN MICROSOFT PROGRAMS		
HIGH LEVEL OF RESPONSIBILITY		
FAST LEARNING SKILLS		
CAN WORK UNDER PRESSURE AND LESS SUPERVISION		

(Continue on separate sheet if necessary)				
SIGNATURE		DATE		

(Continue on separate page)

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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?

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:
RESIGNATION

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.
EMILY C. RODRIGUEZ	VILLA SOCORRO SUBD., BRGY.SAN ISIDRO, OWAK, ORMOC CITY	09399161752
RICAFLOR S. SUAN, CPA	BRGY. STO. NIÑO, ORMOC CITY	09062031916
MARISSA L. OMOTO	BLOOMFIELDS SUBD., BRGY. SAN ISIDRO, ORMOC CITY	09399352615

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.

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: TIN

ID/License/Passport No.: 328-849-847

Date/Place of Issuance: 12/15/2016, ORMOC CITY

Signature (Sign inside the box)

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this 11 SEP 2020, at _____, affiant exhibiting his/her validly issued government ID as indicated above.

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Series of 2020

ALFAN BAFEL G. SANTOLINO
Notary Public for City of Ormoc, Municipalities of
Kantanga, Marikina, and the District of
Notarial Commission No. ORM-18-12-013
Commission Under December 31, 2020
2/F Brazil Bldg., Bonifacio St., Ormoc City
Roll No. 58859
BSP No. 108786, Leyte Chapter, 01/09/2020
PTR No. 6232587, Ormoc City, 01/07/2020
MCLE Compliance No. 31-0011103 until 04/14/2022
Person Administering Oath
TIN No. 999-027126