

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	Sabando		
FIRST NAME	Menchu		NAME EXTENSION (JR., SR) NA
MIDDLE NAME	Ducanflor		
3. DATE OF BIRTH (mm/dd/yyyy)	06/15/1993	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		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	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
7. HEIGHT (m)	1.253	ZIP CODE	
8. WEIGHT (kg)	49 kg	18. PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
9. BLOOD TYPE	A positive	ZIP CODE	
10. GSIS ID NO.	NA		
11. PAG-IBIG ID NO.	1211 84012100		
12. PHILHEALTH NO.	13202091124		
13. SSS NO.	06636611203	19. TELEPHONE NO.	
14. TIN NO.	321-728-991	20. MOBILE NO.	09066662458 / 09399861038
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	menchusabando@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	NA		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NA	NAME EXTENSION (JR., SR)	NA	
MIDDLE NAME	NA			
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	Sabando			
FIRST NAME	Zacarias	NAME EXTENSION (JR., SR)	Jr	
MIDDLE NAME	Gomez			
25. MOTHER'S MAIDEN NAME	Ducanflor			
SURNAME				
FIRST NAME	Nelia			
MIDDLE NAME	Tripoli			

(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	Baybay II (South) Central School	Kindergarten - Grade VI	1998	2005		2005	NA
SECONDARY	Franciscan College of the Immaculate Conception	Highschool	2005	2009		2009	NCAE Top Achiever
VOCATIONAL / TRADE COURSE							
COLLEGE	Franciscan College of the Immaculate Conception	Bachelor Of Science in Business Administration major in Mgt.	2009	2015		2015	Academic Honor
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE	<i>Menchu Sabando</i>	DATE	11/20/2023
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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	<i>M. B. [Signature]</i>	DATE	11/20/2023
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATIONS

[illegible]

(Continue on separate sheet if necessary)

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

[illegible]

(Continue on separate sheet if necessary)

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Answering Q&A / Solving-Online Test	most Outstanding Branch Accountant Leyte Areas CEN most Outstanding Branch Accountant whole CEN 1-2017	Singles for Christ
Singing		

(Continue on separate sheet if necessary)

SIGNATURE	<i>[Signature]</i>	DATE	11/10/2023
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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: _____

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.
Valene Y. Vergis	Barangay City Lytle	(525) 000-1000
Jose Mica Gaceras	Ormoc City, Leyte	09659607158
Jose Rose Bandalan	Barangay City Lytle	09102539788

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.

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

Government Issued ID: Phil. National ID / Passport
ID/License/Passport No.: Passport #. P5742373C
Date/Place of Issuance: 09/25/2023 BFA Tacloban

Signature (Sign inside the box)
Date Accomplished: 11/20/2023



Right Thumbmark

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

Person Administering Oath

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word *Present*, e.g., 1998–Present. Work experience should be listed from most recent first.

- Duration: September 04, 2023-Present
- Position: Administrative Aide III (JO)
- Name of Office/Unit: Accounting Office
- Immediate Supervisor: Mr. Nick Freddy R. Bello
- Name of Agency/Organization and Location: Visayas State University, Baybay City, Leyte

- Summary of Actual Duties
 - Responsible for the posting of Job Order payrolls, students Assistant's payroll, scholars and GTA; prepares monthly list of Job Order and outsider tax deductions for remittance; prepares monthly Job Order & Part-timer Pag-ibig Remittance.

- Duration: August 30, 2018-July 14, 2023
 - Position: Accounting Supervisor/Area Accountant
 - Name of Office/Unit: Accounting Department
 - Immediate Supervisor: Estela Marie D. Miculob
 - Name of Agency/Organization and Location: Community Economic Ventures (A Microfinance NGO), Inc.
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- Summary of Actual Duties
 - Responsible in providing adequate technical in Area assignments during Financial review of documents; recording of all financial transactions and financial reporting; Conducts regular visits to every branch by coaching; auditing financial transactions; assists the management in conducting trainings and equipping on financial analysis and providing adequate technical support to Branch Accountant and in ensuring that financial policies are well implemented

M. S. Srinivasan
(Signature over Printed Name
of Employee/Applicant)

Date: 02/10/2024

WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.


2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

- Duration: April 15, 2015-June 16, 2017
- Position: Branch Accountant
- Name of Office/Unit: Accounting Department
- Immediate Supervisor: Aivie Flores
- Name of Agency/Organization and Location: Community Economic Ventures (A Microfinance NGO), Inc.-Baybay Branch

- Summary of Actual Duties:
Responsible in recording financial transactions & maintaining books of accounts of the branch; ensures compliance of internal control in the branch; filing and maintenance of financial records, accounting & loan tracking system; physical inventory of branch Assets.

- Duration: January 03, 2018-August 27, 2018
- Position: Accounting Clerk
- Name of Office/Unit: Accounting
- Immediate Supervisor: Josephine Soliano
- Name of Agency/Organization and Location: Soliano's Bookkeeping Firm

- Summary of Actual Duties
 - Responsible in recording financial transactions; prepares clients' remittances (SSS, Pag-ibig & Philhealth); process BIR transactions and docs for all clients.



 (Signature over Printed Name
 of Employee/Applicant)

Date: 02/10/2024