

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. TDS FORM

(Do not fill up For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	DIDAL		
FIRST NAME	POCA JOE		NAME EXTENSION (JR., SR.)
MIDDLE NAME	ASIS		
3. DATE OF BIRTH (mm/dd/yyyy)	2/23/1990	16. CITIZENSHIP	☒ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization Pls. indicate country:
4. PLACE OF BIRTH	BAYBAY LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	☒ Male ☐ Female		
6. CIVIL STATUS	☒ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	158 A BONFACIO House/Block of No. Street Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.75	ZIP CODE	
8. WEIGHT (kg)	72	18. PERMANENT ADDRESS	158 A BONFACIO House/Block of No. Street Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
9. BLOOD TYPE	O	ZIP CODE	6521
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	N/A
11. PASS-BIG ID NO.	121066456876	20. MOBILE NO.	09150885070
12. PHU/HEALTH NO.	120511519514	21. E-MAIL ADDRESS (if any)	phaj_joe@yahoo.com
13. SSN NO.	0630264009		
14. TIN NO.	3128003120009		
15. AGENCY EMPLOYEE NO.			

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	DIDAL			
FIRST NAME	MANUEL	NAME EXTENSION (JR., SR.)		
MIDDLE NAME	CALIPARA			
25. MOTHER'S MAIDEN NAME	DUARTE			
SURNAME	DIDAL			
FIRST NAME	MAURA			
MIDDLE NAME	ASIS			

(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 NORTH CENTRAL SCHOOL	PRIMARY EDUCATION	N/A	N/A	N/A	2002	N/A
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	HIGH SCHOOL	N/A	N/A	N/A	2006	N/A
VOCATIONAL / TRADE COURSE							
COLLEGE	VISAYAS STATE UNIVERSITY	BS ECONOMICS	N/A	N/A	N/A	2010	N/A
GRADUATE STUDIES	CEBU NORMAL UNIVERSITY	MASTERS IN PUBLIC ADMINISTRATION	N/A	N/A	CERTIFICATE OF PROFICIENCY	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	2/7/2020
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[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	2/7/2020
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[illegible]

VIL. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED	
1. Name of the training program	
2. Date of training	
3. Duration of training	
4. Location of training	
5. Name of the trainer	
6. Name of the organization	
7. Name of the sponsor	
8. Name of the participant	
9. Name of the supervisor	
10. Name of the manager	
11. Name of the director	
12. Name of the executive	
13. Name of the officer	
14. Name of the clerk	
15. Name of the stenographer	
16. Name of the typewriter	
17. Name of the printer	
18. Name of the publisher	
19. Name of the distributor	
20. Name of the agent	
21. Name of the broker	
22. Name of the dealer	
23. Name of the wholesaler	
24. Name of the retailer	
25. Name of the manufacturer	
26. Name of the importer	
27. Name of the exporter	
28. Name of the contractor	
29. Name of the subcontractor	
30. Name of the consultant	
31. Name of the advisor	
32. Name of the expert	
33. Name of the specialist	
34. Name of the professional	
35. Name of the academic	
36. Name of the researcher	
37. Name of the analyst	
38. Name of the evaluator	
39. Name of the monitor	
40. Name of the supervisor	
41. Name of the manager	
42. Name of the director	
43. Name of the executive	
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64. Name of the specialist	
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156. Name of the expert	
157. Name of the specialist	
158. Name of the professional	
159. Name of the academic	

Also from the journal: *Journal of Advertising* program and include only the relevant *Advertising* taken for the last two (2) years for Division 146/Executive Management position.

[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)
VOLLEYBALL	N/A	N/A
CUSTOMER CENTRIC/SALES	N/A	N/A

SIGNATURE		DATE	2/1/2020
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2/7/2020

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) <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>KIRBY JUNTONG</td> <td>CEBU CITY</td> <td>9499915891</td> </tr> <tr> <td>ERNESTO BULAYOG</td> <td>VISAYAS STATE UNIVERSITY</td> <td>9981625091</td> </tr> <tr> <td>LORRAINE MAY ACEJAS</td> <td>CEBU CITY</td> <td>9257888878</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	KIRBY JUNTONG	CEBU CITY	9499915891	ERNESTO BULAYOG	VISAYAS STATE UNIVERSITY	9981625091	LORRAINE MAY ACEJAS	CEBU CITY	9257888878
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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 cases 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: PASSPORT ID/License/Passport No.: P1791653A Date/Place of Issuance: 27/1/2017 DFA CEBU	 Signature (Sign inside the box) 2/7/2020 Date Accomplished												
 Right Thumbmark													
SUBSCRIBED AND SWORN to before me this <u>FEB 07 2020</u> at _____, applicant exhibiting his/her validly issued government ID as indicated above  ATTY. MARCELLE L. AURE PUBLIC COUNSEL PURSUANT TO R.A. 9406 Person Administering Oath													