

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	Mondal		
FIRST NAME	Nelsie	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	Fernandez		
3. DATE OF BIRTH (mm/dd/yyyy)	12/08/1975	16. CITIZENSHIP	☒ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization Pls. indicate country:
4. PLACE OF BIRTH	Baybay City, Leyte	If holder of dual citizenship, please indicate the details.	Philippines
5. SEX	☐ Male ☒ Female		
6. CIVIL STATUS	☐ Single ☒ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	Purok I House/Block/Lot No. Street Pangasungan Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.50	ZIP CODE	6521
8. WEIGHT (kg)	64.00		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	Purok I House/Block/Lot No. Street Pangasungan Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6521
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	N/A	19. TELEPHONE NO.	N/A
13. SSS NO.	N/A	20. MOBILE NO.	939-764-3709
14. TIN NO.	N/A	21. E-MAIL ADDRESS (if any)	nelsie.mondal@vsu.edu.ph
15. AGENCY EMPLOYEE NO.	V01143		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Mondal		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Hernando	NAME EXTENSION (JR., SR)	Carl Justin F. Mondal	12/18/2008
MIDDLE NAME	Labayan			
OCCUPATION	Faculty			
EMPLOYER/BUSINESS NAME	Visayas State University			
BUSINESS ADDRESS	Visca, Baybay City, Leyte			
TELEPHONE NO.				
24. FATHER'S SURNAME	Fernandez			
FIRST NAME	Odon	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Gucela			
25. MOTHER'S MAIDEN NAME	Lilia Posas Modina			
SURNAME	Fernandez			
FIRST NAME	Lilia			
MIDDLE NAME	Modina		(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	N/A						
SECONDARY	N/A						
VOCATIONAL/ TRADE COURSE	N/A						
COLLEGE	N/A						
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	03/23/2023
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

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

[illegible]

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	03/23/2023
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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) <table><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr><tr><td>Beatriz S. Belonias</td><td>Brgy. Candadam, Baybay City, Leyte</td><td>09173113309</td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></table>			NAME	ADDRESS	TEL. NO.	Beatriz S. Belonias	Brgy. Candadam, Baybay City, Leyte	09173113309						
NAME	ADDRESS	TEL. NO.												
Beatriz S. Belonias	Brgy. Candadam, Baybay City, Leyte	09173113309												
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.		ID picture taken within the last 6 months 3.5 cm x 4.5 cm (passport size) With full and handwritten name tag and signature over printed name Computer generated or photocopied picture is not acceptable PHOTO Right Thumbmark												
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i> Government Issued ID: N/A ID/License/Passport No.: N/A Date/Place of Issuance: N/A	Signature (Sign inside the box) 03/23/2023 Date Accomplished													
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above. Person Administering Oath														