

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	Dagohoy				
	FIRST NAME	Devenah Dawn			NAME EXTENSION (JR., SR) N/A
	MIDDLE NAME	Tolibas			
3. DATE OF BIRTH (mm/dd/yyyy)	12/16/2001		16. CITIZENSHIP If holder of dual citizenship, please indicate the details.	☒ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization Pls. indicate country:	
4. PLACE OF BIRTH				Philippines	
5. SEX AT BIRTH	☐ Male ☒ Female				
6. CIVIL STATUS	☒ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:		17. RESIDENTIAL ADDRESS ZIP CODE	Circumferential Road	
				House/Block/Lot No. Street	
				Subdivision/Village Triana	
7. HEIGHT (m)	1.63			LIMASAWA SOUTHERN LEYTE	
				City/Municipality Province	
				6618	
8. WEIGHT (kg)	42.50			18. PERMANENT ADDRESS ZIP CODE	House/Block/Lot No. Street
9. BLOOD TYPE	N/A		Subdivision/Village Barangay		
10. UMID ID NO.			City/Municipality Province		
11. PAG-IBIG ID NO.	N/A				
12. PHILHEALTH NO.	N/A				
13. PhilSys NO. (PSN)			19. TELEPHONE NO.	N/A	
14. TIN NO.	N/A		20. MOBILE NO.	930-702-8041	
15. AGENCY EMPLOYEE NO.	V02989		21. E-MAIL ADDRESS (if any)	devenah.dagohoy@vsu.edu.ph	

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	N/A					
	FIRST NAME	N/A			NAME EXTENSION (JR., SR) N/A	
	MIDDLE NAME	N/A				
25. MOTHER'S MAIDEN NAME	N/A					
	SURNAME	N/A				
	FIRST NAME	N/A				
	MIDDLE NAME	N/A				
(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	09/22/2025
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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	09/22/2025
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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		CONTACT NO. AND/OR EMAIL
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.) <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) 09/22/2025 Date Accomplished
		Right Thumbmark
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.		
Person Administering Oath		