

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 if accomplished through own handwriting. Tick appropriate boxes (☐) and use separate sheet if necessary. Indicate N/A if not applicable. **DO NOT ABBREVIATE.**

I. PERSONAL INFORMATION

1. SURNAME	BALDOS		
2. FIRST NAME	FRED LEANDER	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	MESIAS		
3. DATE OF BIRTH (dd/mm/yyyy)	25/07/2002	16. CITIZENSHIP	☒ Filipino ☐ Dual Citizenship ☒ by birth ☐ by naturalization Pls. indicate country:
4. PLACE OF BIRTH	ORMOC CITY, LEYTE	If holder of dual citizenship, please indicate the details.	Philippines ▼
5. SEX AT BIRTH	☒ Male ☐ Female		
6 CIVIL STATUS	☒ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:		
7. HEIGHT (m)	1.58	17. RESIDENTIAL ADDRESS	APT. 31 KILBOURNE DRIVE House/Block/Lot No. Street N/A VISCA PANGASUGAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
8. WEIGHT (kg)	53	ZIP CODE	6521
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS	APT. 31 KILBOURNE DRIVE House/Block/Lot No. Street N/A VISCA PANGASUGAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
10. UMID ID NO.	N/A	ZIP CODE	6521
11. PAG-IBIG ID NO.	N/A	19. TELEPHONE NO.	(053) 563-1219
12. PHILHEALTH NO.	N/A	20. MOBILE NO.	09518313528
13. PhilSys Number (PSN):	N/A	21. E-MAIL ADDRESS (if any)	yanyanbaldos@gmail.com
14. TIN NO.	N/A		
15. AGENCY EMPLOYEE NO.	N/A		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (dd/mm/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A	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	BALDOS			
FIRST NAME	JESUS FREDDY	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	MARTOS			
25. MOTHER'S MAIDEN NAME				
SURNAME	MESIAS			
FIRST NAME	LEAH			
MIDDLE NAME	BORINAGA		(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	VISCA FOUNDATION ELEMENTARY SCHOOL	ELEMENTARY	2007	2015	N/A	2015	N/A
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	SENIOR HIGH SCHOOL	2015	2021	N/A	2021	WITH HONORS
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN DEVELOPMENT COMMUNICATION	2021	2025	N/A	2025	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	28/10/2025
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IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

(Include private employment. Start from your recent work.) Description of duties should be indicated in the attached Work Experience Sheet.

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	28/10/2025
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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 (dd/mm/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	DON'T LET THE POX STOP YOU: A GUIDE TO CHICKENPOX PREVENTION	13/12/2024	13/12/2024	4.0	CO-COORDINATOR
	AMARANTH - VISAYAS STATE UNIVERSITY STUDENT PUBLICATION	1/4/2023	28/4/2024	N/A	PHOTOJOURNALIST
	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL CIVIL ARMY TRAINING	25/5/2018	8/5/2019	N/A	ALPHA SECOND PLATOON LEADER
	VSU CHORAL ENSEMBLE	9/11/2022	25/7/2025	N/A	TENOR II / MEDIA SPECIALIST

(Continue on separate sheet if necessary)

[illegible][illegible]

(Continue on separate sheet if necessary)

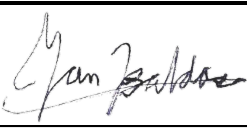
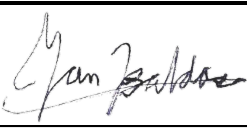
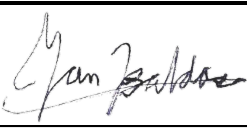
[illegible]

(Continue on separate sheet if necessary)

SIGNATURE

Jan Balder

DATE	28/10/2025
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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, as amended); and (c) Expanded Solo Parents Welfare Act (RA 11861), 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: 35%;">NAME</th> <th style="width: 35%;">OFFICE / RESIDENTIAL ADDRESS</th> <th style="width: 30%;">CONTACT NO. AND/OR EMAIL</th> </tr> </thead> <tbody> <tr> <td>ALVIOLA, ULDERICO B.</td> <td>BAYBAY CITY</td> <td>ub.alviola@vsu.edu.ph</td> </tr> <tr> <td>GRAVOSO ROTACIO S.</td> <td>BAYBAY CITY</td> <td>r.gravoso@vsu.edu.ph</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	OFFICE / RESIDENTIAL ADDRESS	CONTACT NO. AND/OR EMAIL	ALVIOLA, ULDERICO B.	BAYBAY CITY	ub.alviola@vsu.edu.ph	GRAVOSO ROTACIO S.	BAYBAY CITY	r.gravoso@vsu.edu.ph			
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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 case/s against me.													
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SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above. Person Administering Oath													