

# 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	SABEJON		
2. FIRST NAME	REMELITO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	AZARES		
3. DATE OF BIRTH (dd/mm/yyyy)	09/05/1996	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	BAYBAY, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX AT BIRTH	<input checked="" type="checkbox"/> Male <input 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	N/A House/Block/Lot No. Street SITIO SAN VICENTE KILIM Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.68	ZIP CODE	6521
8. WEIGHT (kg)	66	18. PERMANENT ADDRESS	N/A House/Block/Lot No. Street SITIO SAN VICENTE KILIM Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
9. BLOOD TYPE	B+	ZIP CODE	6521
10. UMID ID NO.	N/A	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	1212-6580-1860	20. MOBILE NO.	09651778482
12. PHILHEALTH NO.	13-250343454-0	21. E-MAIL ADDRESS (if any)	remelitosabejon@gmail.com
13. PhilSys Number (PSN):	N/A		
14. TIN NO.	605-145-741		
15. AGENCY EMPLOYEE NO.	VJO02109		

## 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
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	SABEJON			
FIRST NAME	LOLITO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	TABARANZA			
25. MOTHER'S MAIDEN NAME				
SURNAME	AZARES			
FIRST NAME	REMEDIOS			
MIDDLE NAME	NAPOLES			

(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	KILIM ELEMENTARY SCHOOL		2002	2008	GRADUATED	2008	
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL		2008	2012	GRADUATED	2012	
VOCATIONAL / TRADE COURSE	N/A		N/A	N/A		N/A	
COLLEGE	VISAYAS STAE UNIVERSITY		2012	2019	GRADUATED	2019	
GRADUATE STUDIES	N/A		N/A	N/A		N/A	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	21/11/25
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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.

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

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(Continue on separate sheet if necessary)			
SIGNATURE		DATE	2/11/25

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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		
	Visayas State University ROTC UNIT	20/08/2017	28/02/2019		GRADUATE MILITARY ASSISTANT(GMA)

(Continue on separate sheet if necessary)

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

30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (dd/mm/yyyy)		NUMBER OF HOURS	Type of L&D (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	Workshop on the Completion of LUDIP	03/17/2025	04/04/2025	32 hours		Visayas State University - Tolosa Campus
	Orientation on Financial Management transaction in VSU	03/13/2025	03/13/2025	8 hours		Visayas State University
	University Strategic Planning Training Workshop	07/22/2024	07/26/2024	40 hours		Visayas State University
	Strategic Foresight-Scenario Building Training Workshop	07/15/2024	07/19/2024	40 hours		Visayas State University
	Orientation of Guidelines and Procedures on Processes/Services of the Offices under ASO	02/23/2024	02/23/2024	8 hours		Visayas State University
	ISO 9001:2015 Awareness & Re-awareness Webinar	08/29/2023	08/29/2023	8 hours		Visayas State University
	HRIS Software Onboarding	12/06/2023	12/06/2023	8 hours		Visayas State University
	Training-Workshop on Claims Adjustment and Settlement	03/10/2020	03/11/2020	16 hours		Philippine Crop Insurance Corporation
	Seminar-Lecture on Horticulture in Pakistan	09/10/2014	09/10/2014	8 hours		Philippine Root Crop research and Training Center

(Continue on separate sheet if necessary)

**VIII. OTHER INFORMATION**

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	CLERICAL SKILLS		N/A		N/A
	COMPUTER LITERATE				
	DRAWING REALISTIC PORTRAIT				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	21/11/25
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<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>														
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>Status of Case/s: _____</p>														
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>														
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>														
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>														
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>														
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>														
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <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>Glenn G. Pajares</td> <td>OVPDP</td> <td>1004</td> </tr> <tr> <td>Manuel. D. Gacutan Jr.</td> <td>DAS</td> <td>1017</td> </tr> <tr> <td>Toni Marc L. Dargantes</td> <td>OPD</td> <td>1160</td> </tr> </tbody> </table>		NAME	OFFICE / RESIDENTIAL ADDRESS	CONTACT NO. AND/OR EMAIL	Glenn G. Pajares	OVPDP	1004	Manuel. D. Gacutan Jr.	DAS	1017	Toni Marc L. Dargantes	OPD	1160		
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<p>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.</p>															
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<p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; width: 300px; height: 60px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>															