

## 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	BELLO		
FIRST NAME	BRET JOHNSON	NAME EXTENSION (JR., SR)	NA
MIDDLE NAME	GONZALES		
3. DATE OF BIRTH (mm/dd/yyyy)	12/18/1997	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	SOGOD, SOUTHERN LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<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	PUROK 5 House/Block/Lot No. Street RIZAL Subdivision/Village Barangay SOGOD SOUTHERN LEYTE City/Municipality Province ZIP CODE 6606
7. HEIGHT (m)	1.54m	18. PERMANENT ADDRESS	PUROK 5 House/Block/Lot No. Street RIZAL Subdivision/Village Barangay SOGOD SOUTHERN LEYTE City/Municipality Province ZIP CODE 6606
8. WEIGHT (kg)	65kg		
9. BLOOD TYPE	O		
10. GSIS ID NO.	NA		
11. PAG-IBIG ID NO.	121321605682		
12. PHILHEALTH NO.	13-251742676-1		
13. SSS NO.	06-4602175-7	19. TELEPHONE NO.	NA
14. TIN NO.	727-296-299	20. MOBILE NO.	09942658966
15. AGENCY EMPLOYEE NO.	NA	21. E-MAIL ADDRESS (if any)	bretjohnsonbello21@gmail.com

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	NA		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NA	NAME EXTENSION (JR., SR)	NA	NA
MIDDLE NAME	NA			
OCCUPATION	NA			
EMPLOYER/BUSINESS NAME	NA			
BUSINESS ADDRESS	NA			
TELEPHONE NO.	NA			
24. FATHER'S SURNAME	BELLO			January 28, 1962
FIRST NAME	TIRSO	NAME EXTENSION (JR., SR)	NA	
MIDDLE NAME	HINAY			
25. MOTHER'S MAIDEN NAME				
SURNAME	GONZALES			December 20, 1966
FIRST NAME	BRENDA			
MIDDLE NAME	SIEGA			

(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	SOGOD SPED CENTER	ELEMENTARY	2009	2010	GRADUATED	2010	NA
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	HIGH SCHOOL	2010	2014	GRADUATED	2014	NA
VOCATIONAL / TRADE COURSE	NA	NA	NA	NA	NA	NA	NA
COLLEGE	SOUTHERN LEYTE STATE UNIVERSITY MAIN CAMPUS	BACHELOR OF TECHNOLOGY AND LIVELIHOOD EDUCATION MAJOR IN INFORMATION COMMUNICATION	2018	2022	GRADUATED	2022	NA
GRADUATE STUDIES	NA	NA	NA	NA	NA	NA	NA

(Continue on separate sheet if necessary)

SIGNATURE		DATE	AUGUST 21, 2023
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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.

(Continued on adjacent page if necessary)

AUGUST 21, 2023

## X VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION'S

[illegible]

(Continue on separate sheet if necessary)

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

[illegible]







(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)
COMPUTER LITERATE	NA	PHILIPPINE ASSOCIATION FOR TEACHERS AND EDUCATORS-MEMBER
MICROSOFT OFFICE SPECIALIST- POWERPOINT 2013-2016		
EXCELLENT COMMUNICATION SKILLS		

(Continue on separate sheet if necessary)

SIGNATURE	<i>[Signature]</i>	DATE	AUGUST 21, 2003
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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); and (c) Solo Parents Welfare Act of 2000 (RA 8972), 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%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>ENGR. MANOLO B LORETO JR.</td> <td>VISCA, BAYBAY CITY, LEYTE</td> <td>9264458186</td> </tr> <tr> <td>JUVY P. OBUS</td> <td>SAN ROQUE, SOGOD, SOUTHERN LEYTE</td> <td>9460224508</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	ENGR. MANOLO B LORETO JR.	VISCA, BAYBAY CITY, LEYTE	9264458186	JUVY P. OBUS	SAN ROQUE, SOGOD, SOUTHERN LEYTE	9460224508			
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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 <u>21</u> <u>AUG</u> 2023, affiant exhibiting his/her validly issued government ID as indicated above.</p> <p>WIT: <u>ATTY. RAYMOND H. OBUS</u>        NOTARY PUBLIC FOR SOUTHERN LEYTE        ZONE III, SOGOD, SOUTHERN LEYTE        RTC - N. O. - 001 - 2024 UNTIL DEC. 20, 2024        PTR No. 9034/Person Administering Office: MAAGIN, LEYTE        IUP No. 236322 - 1000/222 - PABLO CITY</p>													

