

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.

CS ID No.

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	FERNANDEZ		
FIRST NAME	FLOR EZRA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ALOJADO		
3. DATE OF BIRTH (mm/dd/yyyy)	11/9/2002	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citizenship, please indicate the details	Philippines
5. SEX	<input type="checkbox"/> Male <input checked="" 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	M.L. QUEZON ST. Street POBLACION ZONE 14 Barangay BAYBAY LEYTE City/Municipality Province ZIP CODE 6521
7. HEIGHT (m)	1.50	18. PERMANENT ADDRESS	M.L. QUEZON ST. Street POBLACION ZONE 14 Barangay BAYBAY LEYTE City/Municipality Province ZIP CODE 6521
8. WEIGHT (kg)	40		
9. BLOOD TYPE		19. TELEPHONE NO.	
10. GSIS ID NO.	N/A	20. MOBILE NO.	09624109864
11. PAG-IBIG ID NO.	N/A	21. E-MAIL ADDRESS (if any)	florezrafernandez11@gmail.com
12. PHILHEALTH NO.	N/A		
13. SSS NO.	N/A		
14. TIN NO.	639-723-090-00000		
15. AGENCY EMPLOYEE NO.	N/A		

II. FAMILY BACKGROUND

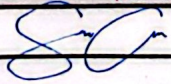
22. SPOUSE'S SURNAME	N/A		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NAME EXTENSION (JR., SR)		N/A	
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	FERNANDEZ			
FIRST NAME	FLOR EZRA	NAME EXTENSION (JR., SR)		
MIDDLE NAME	ALOJADO			
25. MOTHER'S MAIDEN NAME				
SURNAME	ALOJADO			
FIRST NAME	MIRAFLORES			
MIDDLE NAME	ULBATA			

(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	BAYBAY I CENTRAL SCHOOL					2015	3RD HONORABLE MENTION
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL					2019	LGU SCHOLAR/ WITH HIGH
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN CHEMISTRY				2025	COLLEGE SCHOLAR/ CUM LAUDE
GRADUATE STUDIES							

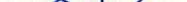
(Continue on separate sheet if necessary)

SIGNATURE		DATE	07/16/25
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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.

[illegible]

SIGNATURE		DATE	07/16/25
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[illegible]

(Continue on separate sheet if necessary)

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

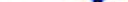
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VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	LEADERSHIP		VSU CHEMICAL SOCIETY - YEAR LEVEL REPRESENTATIVE		PHILIPPINE ASSOCIATION OF CHEMISTRY STUDENTS, INC. - MEMBER
	DANCING				VSU CYF CAMPUS MINISTRY - TREASURER
	PLAYING BASS GUITAR				CHRISTIAN YOUTH FELLOWSHIP - MEMBER

(Continue on separate sheet if necessary)

SIGNATURE		DATE	07/16/25
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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?

☐ YES ☒ NO

b. within the fourth degree (for Local Government Unit - Career Employees)?

☐ YES ☒ NO

If YES, give details: _____

35. a. Have you ever been found guilty of any administrative offense?

☐ YES ☒ NO

If YES, give details: _____

b. Have you been criminally charged before any court?

☐ 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)?

☐ YES ☒ NO

If YES, give details: _____

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: _____

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?

☐ YES ☒ NO

If YES, please specify: _____

b. Are you a person with disability?

☐ YES ☒ NO

If YES, please specify ID No: _____

c. Are you a solo parent?

☐ YES ☒ NO

If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
KEVIN NICK S. BANDIBAS	BAYBAY CITY, LEYTE	



PHOTO

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 cases against me.

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)

PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: TIN ID

ID/License/Passport No.: 639-723-090-00000

Date/Place of Issuance: 12/06/2023, ORMOC CITY, LEYTE

Signature (Sign inside the box)

07/16/25

Date Accomplished



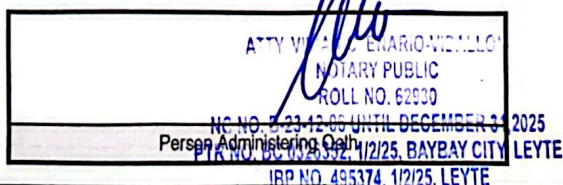
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SUBSCRIBED AND SWORN to before me this

16 JUL 2025

, affiant exhibiting his/her validly issued government ID as indicated above.

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MCLE COMPLIANCE NO. VIII-0014132