

# 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	DACLIZON		
FIRST NAME	SARAH FAITH		NAME EXTENSION (JR., SR)
MIDDLE NAME	CINTO		
3. DATE OF BIRTH (mm/dd/yyyy)	10/07/1997	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	HILONGOS LEYTE	please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	PUROK 4 House/Block/Lot No. Street GABAS Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.51	ZIP CODE	6521
8. WEIGHT (kg)	56	18. PERMANENT ADDRESS	PUROK 4 House/Block/Lot No. Street GABAS Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
9. BLOOD TYPE	B	ZIP CODE	6521
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	
11. PAG-IBIG ID NO.	1212-8772-1150	20. MOBILE NO.	09452500996
12. PHILHEALTH NO.	13-025521698-9	21. E-MAIL ADDRESS (if any)	<a href="mailto:sarahfaithdaclizon@gmail.com">sarahfaithdaclizon@gmail.com</a>
13. SSS NO.	N/A		
14. TIN NO.	601-297-686		
15. AGENCY EMPLOYEE NO.			

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	DACLIZON		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	WILMAR	NAME EXTENSION (JR., SR)	MA. XIANNAH ABIGAIL C. DACLIZON	01/08/2019
MIDDLE NAME	NOYA		GRACEN ZIPPORAH ROSE C. DACLIZON	08/03/2020
OCCUPATION	PHILROOTCROPS FOOD PROCESSOR			
EMPLOYER/BUSINESS NAME	VSU PHILROOTCROPS			
BUSINESS ADDRESS	VISCA, BAYBAY CITY, LEYTE			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	CINTO			
FIRST NAME	BENJAMIN	JR		
MIDDLE NAME	LINA			
25. MOTHER'S MAIDEN NAME				
SURNAME	MASING			
FIRST NAME	ROSALIE			
MIDDLE NAME	CASICAS			

(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	GABAS CENTRAL SCHOOL						VALEDICTO RIAN
SECONDARY	VSU LABORATORY HIGHSCHOOL			03/14/2014		2014	
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	VISAYAS STATE UNIVERSITY	BS- DEVELOPMENT COMMUNICATION MAJOR IN COMMUNITY BROADCASTING				2019	
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	OCTOBER 16, 2023
-----------	---	------	------------------