

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	BREHONIO		NAME EXTENSION (JR., SR)	
FIRST NAME	SHARA LIZ			
MIDDLE NAME	DEDAE			
3. DATE OF BIRTH (mm/dd/yyyy)	04/26/1997	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	INOPACAN, LEYTE	If holder of dual citizenship, please indicate the details.		
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	House/Block/Lot No. _____ Street _____ Subdivision/Village _____ POBLACION _____ INOPACAN LEYTE City/Municipality _____ Province _____	
7. HEIGHT (m)	1.60	ZIP CODE		
8. WEIGHT (kg)	58	18. PERMANENT ADDRESS	House/Block/Lot No. _____ Street _____ Subdivision/Village _____ POBLACION _____ INOPACAN LEYTE City/Municipality _____ Province _____	
9. BLOOD TYPE	A+	ZIP CODE	6522	
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	N/A	
11. PAG-IBIG ID NO.	1212-3308-9241	20. MOBILE NO.	09286296510	
12. PHILHEALTH NO.	132505259754	21. E-MAIL ADDRESS (if any)	sharalizbrehonio@gmail.com	
13. SSS NO.	06-4139870-2			
14. TIN NO.	350-106-220			
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	BREHONIO			
FIRST NAME	EULITO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	DEDAE			
25. MOTHER'S MAIDEN NAME				
SURNAME	DEDAE			
FIRST NAME	VICTORIA			
MIDDLE NAME	BAGUION			

(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	INOPACAN CENTRAL SCHOOL	PRIMARY	06/06/2004	03/25/2010	N/A	2010	With honors
SECONDARY	TINAGO NATIONAL HIGH SCHOOL	HIGH SCHOOL	06/11/2010	03/28/2014	N/A	2014	4th Honorable mention
VOCATIONAL / TRADE COURSE							
COLLEGE	PALOMPON INSTITUTE OF TECHNOLOGY	BS in Hotel and Restaurant Management	06/10/2014	03/29/2018	N/A	2018	Latin Honor
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/24/2018
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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? 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.
JOEL REY U. ACOB	VISAYAS STATE UNIVERSITY	0956 916 1146
ALELI A. VILLOCINO	VISAYAS STATE UNIVERSITY	0929-6296510
MA. LILIA P. VEGA	VISAYAS STATE UNIVERSITY	9617605332



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 case/s 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: UMID ID

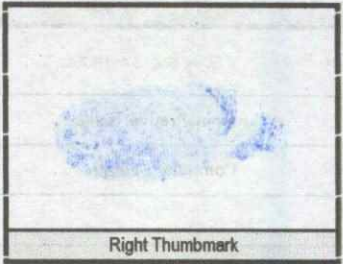
ID/License/Passport No.: 0111-9737824-6

Date/Place of Issuance: CEBU CITY, CEBU

Signature (Sign inside the box)

01/14/2025

Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this 14 JAN 2025, affiant exhibiting his/her validly issued government ID as indicated above.

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ATTY. DECY ROSY PAPA
Public Attorney
(Pursuant to RA No. 9406)

Person Administering Oath