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 P<u>DS FORM</u>. 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) 2. SURNAME PEDUCHE NAME EXTENSION (IR SR) FIRST NAME ANN NINA MIDDLE NAME MACASUHOT 3. DATE OF BIRTH 01/14/1999 16 CITIZENSHIP √ Filipino Dual Citizenship (mm/dd/yyyy) by birth by naturalization 4. PLACE OF BIRTH MAASIN CITY SOUTHERN LEYTE If holder of dual citizenship. Pls. indicate country: please indicate the details 5. SEX Male ✓ Female LOPEZ IAENA ✓ Single Married 17 RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No Street Widowed Separated TALIWA Other/s: Subdivision/Village Barangay MALITBOG SOUTHERN LEYTE 7. HEIGHT (m) 1 63 City/Municipality Province 8. WEIGHT (kg) 69 ZIP CODE 18. PERMANENT ADDRESS LOPEZ JAENA 9. BLOOD TYPE B+ House/Block/Lot No Street TALIWA 10. GSIS ID NO Subdivision/Village Barangay MALITBOG SOUTHERN LEYTE 11 PAG-IRIG ID NO 121275963473 City/Municipality Province 12. PHILHEALTH NO 130255604679 ZIP CODE 6603 13. SSS NO 35-0099588-7 19. TELEPHONE NO N/A 770-941-753 +63970-057-2572 14 TIN NO 20 MORII F NO 15. AGENCY EMPLOYEE NO N/A 21. E-MAIL ADDRESS (if any) annpeduche@gmail.com FAMILY BACKGROUND DATE OF BIRTH (mm/dd/yyyy) 22 SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) NAME EXTENSION (JR., SR) FIRST NAME Ν/Δ MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME PEDUCHE NAME EXTENSION (JR., SR) ENRICO FIRST NAME MIDDLE NAME DANDAN 25. MOTHER'S MAIDEN NAME SURNAME MACASUHOT MANUELITA FIRST NAME MIDDLE NAME **ESCLAMADO** (Continue on separate sheet if necessary) EDUCATIONAL BACKGROUND CHOLARSHI NAME OF SCHOOL LEVEL/ PERIOD OF ATTENDANCE 26 BASIC EDUCATION/DEGREE/COURSE YEAR ACADEMIC LEVEL (Write in full) GRADUATED HONORS UNITS (Write in full) From То RECEIVED MALITBOG CENTRAL SCHOOL GRADUATE 2011 ELEMENTARY 6/6/2006 6/4/2011 SANTO NINO ACADEMY GRADUATE 6/6/2011 6/4/2015 2015 SECONDARY N/A SOUTHERN LEYTE STATE BS BUSINESS ADMINISTRATION - MM 6/6/2016 6/4/2020 COLLEGE 2020 UNIVERSITY - TOMAS OPPUS GRADUATE STUDIES Jedu che SIGNATURE DATE

IV. CIVIL S	ERVICE EL	IGIBILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER				DATE OF			LICENSE (if applicable)		
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT		NUMBER	Date of Validity	
N/A									,
N/A									
/ MODIC	=\/2=2\/5	-	(Continu	ue on separate sheet if n	ecessary)				
	EXPERIENC vate employr	CE ment. Start from your red	cent work) Descrin	ation of duties shoul	d he indicated in the a	ttached V	Vork Experie	ence sheet	
	SIVE DATES	POSITION TITLE	oent work, becomp			la on car	SALARY/ JOB/ PAY GRADE (if		SERVICE
	n/dd/yyyy)		(Write in full/Do			MONTHLY SALARY	applicable)& STEP (Format	STATUS OF APPOINTMENT	
From	То	not abbrevi	ate)	(Write in full/L	(Write in full/Do not abbreviate)		"00-0")/ INCREMENT		
6/5/2021	6/7/2021	OFFICE ST	ΓAFF	MUNICIPALIT	Y OF MALITBOG	7040.00		GIP	
1/6/2021	9/8/2021	ASSISTANT GRAPH	IIC DESIGNER	DESIGNER A2Z		-		PART-TIME	
6/27/2022	1/11/2022	OFFICE ST	ΓAFF	CENTRAL LUME	ER CORPORATION	14500.00			
1/7/2022	1/12/2022	EMAIL AUTOMATIO	N SPECIALIST	NE	ON87	2000.00		PART-TIME	
			(€ ontinu	ue on separate sheet if n	ecessary)			1	
SIGNATURE DATE 4/12/03									
							CS F	JRM 212 (Revised 20	17), Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT			ENT / PEOPLE	E / VOLUNTAR	Y ORGANIZATION/S
29. (Write in full)	From	(mm/dd/vvvv)	NUMBER OF HOURS		POSITION / NATURE OF WORK
N/A					
	(Contin	nue on separate sh	neet if necessary)		
VII. LEARNING AND DEVELOPMENT (L&D)	INTERVENTIO	ONS/TRAININ	G PROGRAM		
(Start from the most recent L&D/training program and include TITLE OF LEARNING AND DEVELOPMENT	INCLUSIVE		n for the last five (5	5) years for Division Type of LD	
30. INTERVENTIONS/TRAINING PROGRAMS (Write in full)	ATTENDANCE		NUMBER OF HOURS	(Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)
N/A	From	То		Technical/etc)	
N/A					
	(01)-				
VIII. OTHER INFORMATION	(Contin	nue on separate sh	neet if necessary)		
31. SPECIAL SKILLS and HOBBIES	NON-ACADEMIC D	DISTINCTIONS / RE	ECOGNITION	(Write in full)	33. ASSOCIATION/ORGANIZATION (Write
	A (Cartin	uo on consente -l	noot if nocessari		<u> </u>
SIGNATURE	for Plan	nue on separate sh	neet if necessary) DA	ATE	4/12/23
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34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate					
	Bureau or Department where you will be approinted,					
	a. within the third degree?	YES NO				
	b. within the fourth degree (for Local Government Unit - Care	er Employees)?	☐ YES ☑ NO			
			If YES, give details:			
L		0				
35.	A. Have you ever been found guilty of any administrative offer	nse?	YES VO			
			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.		y law, decree, ordinance or	☐ YES ☑ NO			
	regulation by any court or tribunal?		If YES, give details:			
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, end		☐ YES ☑ NO			
	phased out (abolition) in the public or private sector?	of term, illustred contract of	If YES, give details:			
38.	a. Have you ever been a candidate in a national or local elec	tion held within the last year	YES NO			
	(except Barangay election)?		If YES, give details:			
	b. Have you resigned from the government service during the		☐ YES ☑ NO			
	the last election to promote/actively campaign for a national of	or local candidate?	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) Mag	na Carta far Disabled Baroons				
10.	(RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 89					
a.	Are you a member of any indigenous group?		YES NO			
b.	Are you a paragon with disphility?	If YES, please specify:				
J.	Are you a person with disability?		│			
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.			
	ARIEL MACASUHOT	BONTOC SOUTHERN LEYTE				
Г	MINETTE NINEZ	MALITBOG SOUTHERN LEYTE				
一						
12. I de deze under eath that I have a coronally accomplished this Demond Date Chart which is a true account and						
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 represen I agree that any misrepresentation made in this docur					
	administrative/criminal case/s against me.					
100	POVERHITHERIC ISSUED TO (I.e. Passport, GSIS: SSS. PRC. Driver's License. Pric. 1					
	PLEASE INDICATE ID Number and Date of	10	· /			
G	sovernment Issued ID: PHILHEALTH	Tompade	riche			
ID/License/Passport No.: 130255604679 Signature (Sign inside) the			the box\			
Data/Place of Issuance: MAASIN CITY SOUTHERN LEYTE			23			
냳	Date Accomptished Right Thumbmark					
SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.						
1						
ı		Person Administering	Oath			

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