

## 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                    | PACATE  |   |   |
| FIRST NAME                    | LOVELY JOY  | NAME EXTENSION (JR., SR)                                    |   |
| MIDDLE NAME                   | MANDRAS   |   |   |
| 3. DATE OF BIRTH (mm/dd/yyyy) | 12/17/2002  | 16. CITIZENSHIP   | <input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship<br><input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization<br>Pls. indicate country: |
| 4. PLACE OF BIRTH             | BAYBAY CITY   | 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<br><input type="checkbox"/> Widowed <input type="checkbox"/> Separated<br><input type="checkbox"/> Other/s: | 17. RESIDENTIAL ADDRESS                                     | CENTRO<br>Street<br>MAYBOG<br>Barangay<br>BAYBAY CITY<br>LEYTE<br>City/Municipality<br>Province   |
| 7. HEIGHT (m)                 | 1.63  | ZIP CODE  | 6521  |
| 8. WEIGHT (kg)                | 55  | 18. PERMANENT ADDRESS                                       | CENTRO<br>Street<br>MAYBOG<br>Barangay<br>BAYBAY CITY<br>LEYTE<br>City/Municipality<br>Province   |
| 9. BLOOD TYPE                 | N/A   | ZIP CODE  | 6521  |
| 10. GSIS ID NO.               | N/A   | 19. TELEPHONE NO.   | N/A   |
| 11. PAG-IBIG ID NO.           | 121352139441  | 20. MOBILE NO.  | 0948-9422-920   |
| 12. PHILHEALTH NO.            | 13-250362511-7  | 21. E-MAIL ADDRESS (if any)                                 | <a href="mailto:lovelypacate07@gmail.com">lovelypacate07@gmail.com</a>  |
| 13. SSS NO.                   | 06-4587474-3  |   |   |
| 14. TIN NO.                   | 661-453-339-0000  |   |   |
| 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               | N/A        | NAME EXTENSION (JR., SR) | N/A   | N/A                        |
| MIDDLE NAME              | N/A        |                          |   |                            |
| OCCUPATION               | N/A        |                          |   |                            |
| EMPLOYER/BUSINESS NAME   | N/A        |                          |   |                            |
| BUSINESS ADDRESS         | N/A        |                          |   |                            |
| TELEPHONE NO.            | N/A        |                          |   |                            |
| 24. FATHER'S SURNAME     | PACATE     |                          |   |                            |
| FIRST NAME               | MANUEL     | JR.                      |   |                            |
| MIDDLE NAME              | BATINO     |                          |   |                            |
| 25. MOTHER'S MAIDEN NAME |            |                          |   |                            |
| SURNAME                  | MANDRAS    |                          |   |                            |
| FIRST NAME               | MA. JURGIN |                          |   |                            |
| MIDDLE NAME              | VELARDE    |                          |   |                            |

(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 | YEAR GRADUATED | SCHOLARSHIP/ ACADEMIC HONORS |
|---------------------------|--------------------------------|--|----------------------|------|-----------------------------|----------------|------------------------------|
|                           |                                |  | From                 | To   |                             |                |                              |
| ELEMENTARY                | MAYBOG ELEMENTARY SCHOOL       | ELEMENTARY                                       | 2008                 | 2014 | GRADUATED                   | 2014           | 4TH HONOR                    |
| SECONDARY                 | DAMULAAAN NATIONAL HIGH SCHOOL | SENIOR HIGH SCHOOL                               | 2014                 | 2020 | GRADUATED                   | 2020           | WITH HONORS                  |
| VOCATIONAL / TRADE COURSE | N/A                            | N/A  | N/A                  | N/A  | N/A                         | N/A            | N/A                          |
| COLLEGE                   | VISAYAS STATE UNIVERSITY       | BACHELOR OF SECONDARY EDUCATION - SOCIAL STUDIES | 2020                 | 2024 | GRADUATED                   | 2024           | CUM LAUDE                    |
| GRADUATE STUDIES          | N/A                            | N/A  | N/A                  | N/A  | N/A                         | N/A            | N/A                          |

(Continue on separate sheet if necessary)

|           |   |      |                 |
|-----------|---|------|-----------------|
| SIGNATURE |  | DATE | OCTOBER 7, 2024 |
|-----------|---|------|-----------------|











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.   |
|-----------------|----------------------------|------------|
| JAY C. BANSALE  | VISCA, BAYBAY CITY, LEYTE  | 9489762630 |
| REX M. AUTIDA   | MAYBOG, BAYBAY CITY, LEYTE | 9176321804 |
| SONIA A. BERTOS | MAYBOG, BAYBAY CITY, LEYTE | 9176348703 |



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: PHIL. ID

ID/License/Passport No.: 6398-6031-2043-8105

Date/Place of Issuance: 9/17/2021 / BAYBAY CITY

*Sjp.*

Signature (Sign inside the box)

OCTOBER 7, 2024

Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this 08 OCT 2024, affiant exhibiting his/her validly issued government ID as indicated above.

Doc. No.: 2945  
Page No.: 73  
Book No.: 11  
Series of 20 24

**ATTY. KIESER CLINT L. PETILLA**  
PUBLIC ATTORNEY I  
Pursuant to R.A. 9406

Person Administering Oath