

## 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	FERNANDEZ		
FIRST NAME	EDINO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	TAN		
3. DATE OF BIRTH (mm/dd/yyyy)	06/11/89	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	Baybay City	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input 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	Purok-1 House/Block/Lot No. Street Ilaya Subdivision/Village Pangasinan Baybay Barangay City/Municipality Leyte Province
7. HEIGHT (m)	5"	ZIP CODE	6521-A
8. WEIGHT (kg)	56 kg	18. PERMANENT ADDRESS	Purok-1 Ilaya House/Block/Lot No. Street Subdivision/Village Pangasinan Baybay Barangay City/Municipality Leyte Province
9. BLOOD TYPE	A+	ZIP CODE	6521-A
10. GSIS ID NO.	NONE	19. TELEPHONE NO.	0950 1331047
11. PAG-IBIG ID NO.	12 12 - 0409 - 1878	20. MOBILE NO.	
12. PHILHEALTH NO.	13 - 02541418 - 8	21. E-MAIL ADDRESS (if any)	
13. SSS NO.	NONE		
14. TIN NO.	331 - 002 - 224 - 00		
15. AGENCY EMPLOYEE NO.			

## II. FAMILY BACKGROUND


22. SPOUSE'S SURNAME	Codog	23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Maricar	Jayde C. Fernandez	09/24/15
MIDDLE NAME	Casimero	Edmar C. Fernandez	10/24/16
OCCUPATION	House wife		11/07/23
EMPLOYER/BUSINESS NAME	None		
BUSINESS ADDRESS	None		
TELEPHONE NO.	None		
24. FATHER'S SURNAME	Fernandez		
FIRST NAME	Isidro		
MIDDLE NAME	Gusela		
25. MOTHER'S MAIDEN NAME			
SURNAME	Tong		
FIRST NAME	Arsenio		
MIDDLE NAME	Mangcao		

(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	Pangasinan Elem. School	Elementary	2004	2010	Graduate	2010	Honor
SECONDARY	AIS - Baboy Central School	Secondary	2014	2020	Graduate	2020	None
VOCATIONAL / TRADE COURSE	N/A	N/A					
COLLEGE	N/A	N/A					
GRADUATE STUDIES	N/A	N/A					

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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[illegible]

#### V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	
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[illegible]

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







[illegible]

### VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Carpentry		Gardians As.
Mason		ECO-Parsons As.
Welder		Parsons. As.
		Pangaragan Halal Mubas A

<p align="center"><i>(Signature and signature date is necessary)</i></p>			
<p><b>SIGNATURE</b></p>		<p><b>DATE</b></p>	



<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>															
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>Status of Case/s: _____</p>															
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>															
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>															
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>															
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>															
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>															
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.												
NAME	ADDRESS	TEL. NO.														
<p>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.</p>																
<p>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</p> <p>PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: _____</p> <p>ID/License/Passport No.: _____</p> <p>Date/Place of Issuance: _____</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">             Signature (Sign inside the box)         </td> <td style="width: 50%; text-align: center;">             Right Thumbmark         </td> </tr> <tr> <td style="text-align: center;">Date Accomplished</td> <td> </td> </tr> </table>	 Signature (Sign inside the box)	 Right Thumbmark	Date Accomplished												
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Date Accomplished																
<p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; width: 300px; height: 60px; margin: 10px auto; text-align: center;"> <p>Person Administering Oath</p> </div>																