

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	GARCES			
FIRST NAME	MARK LOUIS	NAME EXTENSION (JR., SR)		
MIDDLE NAME	LELIS			
3. DATE OF BIRTH (mm/dd/yyyy)	1/21/1997	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:	
4. PLACE OF BIRTH	HILONGOS, LEYTE	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:			
7. HEIGHT (m)	1.70 m	17. RESIDENTIAL ADDRESS	N/A	
8. WEIGHT (kg)	70 kg		ZIP CODE	6521
9. BLOOD TYPE	B+		18. PERMANENT ADDRESS	N/A
10. GSIS ID NO.	N/A			ZIP CODE
11. PAG-IBIG ID NO.	1211-9088-4558	19. TELEPHONE NO.		N/A
12. PHILHEALTH NO.	13-250490350-1	20. MOBILE NO.		+639094919643
13. SSS NO.	06-3865957-7	21. E-MAIL ADDRESS (if any)	mlgarces321@gmail.com	
14. TIN NO.	474-371-554			
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		N/A	N/A
OCCUPATION	N/A		N/A	N/A
EMPLOYER/BUSINESS NAME	N/A		N/A	N/A
BUSINESS ADDRESS	N/A		N/A	N/A
TELEPHONE NO.	N/A		N/A	N/A
24. FATHER'S SURNAME	GARCES		N/A	N/A
FIRST NAME	LUISITO	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	CAGADAS		N/A	N/A
25. MOTHER'S MAIDEN NAME	N/A		N/A	N/A
SURNAME	LELIS		N/A	N/A
FIRST NAME	ZENAIDA		N/A	N/A
MIDDLE NAME	ARCAJ		<i>(Continue on separate sheet if necessary)</i>	

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	HILONGOS SOUTH CENTRAL SCHOOL	ELEMENTARY EDUCATION	2005	2010	N/A	2010	WITH HONORS
SECONDARY	HILONGOS NATIONAL VOCATIONAL SCHOOL	SECONDARY EDUCATION	2010	2014	N/A	2014	WITH HONORS
VOCATIONAL / TRADE COURSE	HILONGOS NATIONAL VOCATIONAL SCHOOL	PERSONAL COMPUTER HARDWARE SERVICING	2010	2014	N/A	2014	BEST IN PCHS
COLLEGE	VISAYAS STATE UNIVERSITY- MAIN CAMPUS	BS IN COMPUTER SCIENCE	2017	2024	163 UNITS	N/A	DOST SCHOLAR
GRADUATE STUDIES	UNIVERSITY OF CEBU - METC	BS IN MARINE ENGINEERING	2014	2017	N/A	2017	MAERSK SCHOLAR

(Continue on separate sheet if necessary)

SIGNATURE		DATE	March 4, 2024
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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? b. within the fourth degree (for Local Government Unit - Career Employees)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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)? 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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? b. Are you a person with disability? c. Are you a solo parent?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
MAGDALENE C. UNAJan	Head, DCST, Visayas State University, Baybay, Leyte	09171304169
RODERICK MAR UNAJan	Admin Aid, IHK, Visayas State University, Baybay, Leyte	09778179877
JANE FRANCIS V. LOBEDICA	HRMO IV, LGU - HILONGOS	567-9715



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.

Right Thumbmark

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i>	
Government Issued ID:	DRIVER'S LICENSE
ID/License/Passport No.:	H12-15-002815
Date/Place of Issuance:	BAYBAY CITY, LEYTE

Signature (Sign inside the box)
March 4, 2024
Date Accomplished

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

Person Administering Oath