ELEMENTARY

Pangasugan Elementary School

PERSONAL DATA SHEET

WARNING: Any misinterpretation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against

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) PERSONAL INFORMATION 2. SURNAME Patonona FIRST NAME Joan MIDDLE NAME Rallos 3. DATE OF BIRTH 12/14/1997 16. CITIZENSHIP √ Filipino Dual Citizenship (mm/dd/yyyy) by birth by naturalization 4. PLACE OF BIRTH Baybay City, Leyte If holder of dual citizenship, Pls. indicate country: please indicate the details. √ Female 5 SEX Male √ Single 17. RESIDENTIAL ADDRESS 603 Purok 2 Married 6 CIVIL STATUS House/Block/Lot No. Street Widowed Separated Pangasugan N/A Other/s: Subdivision/Village Barangay Baybay Levte 1.52 m 7. HEIGHT (m) City/Municipality Province **ZIP CODE** 8. WEIGHT (kg) 55 kg 6521 603 18. PERMANENT ADDRESS Purok 2 9. BLOOD TYPE 0 House/Block/Lot No. Street Pangasugan 10. GSIS ID NO. N/A Subdivision/Village Barangay Baybay Leyte 11. PAG-IBIG ID NO. N/A City/Municipality Province ZIP CODE N/A 6521 12. PHILHEALTH NO. N/A 19. TELEPHONE NO. 13. SSS NO N/A 769-259-124-000 14 TIN NO 20. MOBILE NO. 09153578108 15. AGENCY EMPLOYEE NO N/A 21. E-MAIL ADDRESS (if any) patononajoan@gmail.com **FAMILY BACKGROUND** 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) N/A 22. SPOUSE'S SURNAME N/A FIRST NAME N/A N/A N/A N/A MIDDLE NAME N/A OCCUPATION EMPLOYER/BUSINESS NAME N/A N/A **BUSINESS ADDRESS** N/A TELEPHONE NO. 24. FATHER'S SURNAME N/A FIRST NAME N/A MIDDLE NAME N/A 25. MOTHER'S MAIDEN NAME Anita Rallos Patonona SURNAME Patonona Anita Rallos Patonona FIRST NAME (Continue on separate sheet if necessary) MIDDLE NAME Rallos III. EDUCATIONAL BACKGROUND SCHOLARSHIP NAME OF SCHOOL PERIOD OF ATTENDANCE LEVEL/ 26. BASIC EDUCATION/DEGREE/COURSE YEAR ACADEMIC LEVEL (Write in full) **GRADUATED** HONORS UNITS (Write in full) From То RECEIVED ARNED Valedictori

Primary

6/6/2004

3/26/2010

N/A

2010

SECONDARY	Visayas State University Laboratory High School	Highschool	6/14/2010	4/27/2014	N/A	2014	N/A
VOCATIONAL /	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	Visayas State University	Bachelor of Science in Agriculture	6/2/2014	2/15/2018	N/A	2018	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A
(Continue on separate sheet if necessary)							
SIGNATURE			DAT	E			

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IV. CIVIL S	SERVICE EL	IGIBILITY							
27. CAREE	R SERVICE/ RA	1080 (BOARD/ BAR) UNDER	RATING	DATE OF	DI AGE OF EVANINAT	1011 / 001E	FDMENT	LICENSE (if	_
	LAWS/ CES/ CS ARANGAY ELIGII	BILITY / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINAT	ION / CONF	ERMENI	NUMBER	Date of Validity
	RA 1	080	80.5	November 5-7, 2019	Tacloban (City, Leyte)	0033942	1/17/2020
			(Contin	ue on separate sheet if n	ecessary)				
	EXPERIENC								
	ICIVE DATEC	nent. Start from your red				ttached V	SALARY/ JOB/	ence sheet.	GOV1 SERVICE
	m/dd/yyyy)	POSITION TITLE	(Write in	DEPARTMENT / AGENC		MONTHLY SALARY	PAY GRADE (if applicable)& STEP (Format	STATUS OF APPOINTMENT	SERVICE
From	То	full/Do not abbi	reviate)	(Write in full/I	Do not abbreviate)	CALAINI	"00-0")/ INCREMENT	7.1 OHATIVILIA	
September	October	Enumera	tor	Philippine Sta	atistics Authority		N/A		N/a
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SIGNA	TURE			DATE				

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VI. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS 30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full) Why AgricOOLture 8/16/2018 8/16/2018 2.0 Lecture/Technical 8/16/2018 8/16/2018 2.0 Lecture/Technical NUMBER OF HOURS POSITION / NATURE OF WORK POSITION / NATURE OF WORK
29. (Write in full) From To N/A N/A N/A N/A N/A
From To N/A N/A N/A N/A N/A N/A N/A N/
(Continue on separate sheet if necessary) VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED (Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions) TITLE OF LEARNING AND DEVELOPMENT INCLUSIVE DATES UP ATTENDANCE TITLE OF LEARNING PROGRAMS (Write in full) ATTENDANCE From To Why AgriCOOLture 8/16/2018 8/16/2018 8/16/2018 2.0 Lecture AGREA
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VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED (Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions) 30. TITLE OF LEARNING AND DEVELOPMENT INCLUSIVE DATES OF ATTENDANCE ATTENDANCE From To Why AgriCOOLture 8/16/2018 8/16/2018 8/16/2018 8/16/2018 1. Type of LD (Managerial/Supervisory/Technical/etc) CONDUCTED/ SPONSORED BY (Write in full) CONDUCTED/ SPONSORED BY (Write in full)
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Why AgriCOOLture Nomber of Hours Supervisory/ Technical/etc) Write in full)
Training on Census of Population and Housing 2020 8/3/2020 8/7/2020 40.0 Lecture/Technical Philippine Statistics Authority

(Continue on separate sheet if necessary)
VIII. OTHER INFORMATION
NEW TOTAL OF THE PROPERTY OF T
31. SPECIAL SKILLS and HOBBIES NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) ASSOCIATION/ORGANIZATION (Write in full)
31. SPECIAL SKILLS and HOBBIES (Write in full) Sports (Volleyball Badminton Softball) N/A Philippine Association of
31. SPECIAL SKILLS and HOBBIES (Write in full) 33. (Write in full) Philipping Association of
31. SPECIAL SKILLS and HOBBIES (Write in full) Sports (Volleyball Badminton Softball) N/A Philippine Association of
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(Continue on separate sheet if necessary)					
SIGNATURE		DATE			

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34.	Are you related by consanguinity or affinity to the appoint chief of bureau or office or to the person who has immed Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - 0)	liate supervision over you in the		✓ NO ✓ NO s:
35.	a. Have you ever been found guilty of any administrative	offense?	YES If YES, give detail	NO s:
	b. Have you been criminally charged before any court?		YES If YES, give detail Date Filed: Status of Case/s:	NO is:
36.	Have you ever been convicted of any crime or violation or regulation by any court or tribunal?	of any law, decree, ordinance or	YES If YES, give detail	NO is:
37.	Have you ever been separated from the service in any of retirement, dropped from the rolls, dismissal, termination phased out (abolition) in the public or private sector?		If YES, give detail	S:
38.	a. Have you ever been a candidate in a national or local (except Barangay election)?	election held within the last year	YES If YES, give deta	✓ NO ils:
	b. Have you resigned from the government service during the last election to promote/actively campaign for a natio		YES If YES, give deta	IS:
39. Have you acquired the status of an immigrant or permanent resident of another country?			YES If YES, give detail	NO is (country):
40.	() () ()			
	(RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA	A 8972), please answer the following		
a.	Are you a member of any indigenous group?		YES If YES, please specif	
b.	Are you a person with disability?		YES If YES, please specif	y ID No:
C.	Are you a solo parent?		YES If YES, please specif	y ID No:
41.	REFERENCES (Person not related by consanguinity or affinity to appli	icant /appointee)		
	NAME	ADDRESS	TEL. NO.	
	April Joy Vergara	Visca, Baybay City, Leyte	9153103604	
	Jameil Magomnang	Inopacan Leyte	9206068985	
	Lendelle Editha Cagasan	Visca, Baybay City, Leyte	9981704865	
42.	I declare under oath that I have personally accomplished and complete statement pursuant to the provisions of perthe Philippines. I authorize the agency head/authorized herein. I agree that any misrepresentation made if filing of administrative/criminal case/s against me.	ertinent laws, rules and regulations of representative to verify/validate the	of the Republic of e contents stated	PATONONA, JOAN R
D	PLEASE INDICATE ID Number and Date of			
Je G	overnment Issued ID: PRC			
ID)/License/Passport No.: 0033942	Signature (Sign insid	e the box)	
D:	ate/Place of Issuance: 1/17/2020 Ormoc City			D. L. T.
ΙL	•	Date Accomplis	ined	Right Thumbmark

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

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