

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	Luna		
FIRST NAME	Meriam	NAME EXTENSION (JR., SR)	
MIDDLE NAME	Martinez		
3. DATE OF BIRTH (mm/dd/yyyy)	7/16/1972	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	Ormoc 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 type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street Bunga Subdivision/Village Barangay Baybay Leyte City/Municipality Province
7. HEIGHT (m)	154 cm	ZIP CODE	6521
8. WEIGHT (kg)	62 kg	18. PERMANENT ADDRESS	House/Block/Lot No. Street Bunga Subdivision/Village Barangay Baybay Leyte City/Municipality Province
9. BLOOD TYPE	O	ZIP CODE	6521
10. GSIS ID NO.	CM-3878143 (Policy) & CRN 006-0073-8331-3	19. TELEPHONE NO.	None
11. PAG-IBIG ID NO.	0801-074874-09	20. MOBILE NO.	09359953253
12. PHILHEALTH NO.	13-000015368	21. E-MAIL ADDRESS (if any)	meriam_luna@yahoo.com.
13. SSS NO.	None		
14. TIN NO.	186-777-808		
15. AGENCY EMPLOYEE NO.	v000628		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Luna	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Regino	Diana Grace M. Luna	2/25/1988
MIDDLE NAME	Manilag	Lea M. Luna	9/5/1991
OCCUPATION	Driver/Self-employed	Cindy M. Luna	12/9/1996
EMPLOYER/BUSINESS NAME	Public Utility Vehicle	Regine M. Luna	4/6/1998
BUSINESS ADDRESS	Baybay City, Leyte	Jessica M. Luna	12/24/1999
TELEPHONE NO.	9365341622	Shaira M. Luna	9/23/2001
24. FATHER'S SURNAME	Martinez	Dave Jhared M. Luna	11/3/2009
FIRST NAME	Teodoro		
MIDDLE NAME	Nodalo		
25. MOTHER'S MAIDEN NAME			
SURNAME	Erasmo		
FIRST NAME	Gloria		
MIDDLE NAME	Mendola		

(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	Ormoc City Central School, Ormoc City	N.A	1979	1985	Graduated	1985	Second Honor
SECONDARY	Bunga National High School, Bunga, Baybay City, Leyte	N.A	1991	1992	Graduated	1992	Second Honor
VOCATIONAL / TRADE COURSE	N.A	N.A					
COLLEGE	Franciscan College of the Immaculate Conception, Baybay City, Leyte	Junior Secretarial Course	1993	1995	Graduated	1995	
	Franciscan College of the Immaculate Conception, Baybay City, Leyte	Bachelor of Science in Office Administration	2002	2003	18 units		
GRADUATE STUDIES	N.A	N.A					


(Continue on separate sheet if necessary)

SIGNATURE	DATE
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[illegible]

V. WORK EXPERIENCE
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

SIGNATURE		DATE	June 18, 2018
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIL SOCIETY / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	None				

(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)

30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	Records Management Training	7/6/2017	7/7/2017	16 Hrs		ODAHRD
	Re-Orientation on the 5S Internal Audit Requirements	6/22/2017		8 Hrs.		ODAHRD
	Basic Cooperative Course Seminar	6/10/2017		8 Hrs.		VSUCC
	ISO 9001:2015 Enhancement Seminar-Workshop on Internal Quality Audit	Mar. 2, 2017	Mar. 3, 2017	16 Hrs		ODAHRD
	Seminar-Workshop on 5S & Records Management	Feb. 18, 2017		8 Hrs.		ODAHRD
	Reorientation of Department/Office Secretaries	Nov. 15, 2016		3 Hrs		ODAHRD & PRPEO
	Procurement Planning Workshop	Sept. 13, 2016		8 Hrs.		ODAHRD
	Orientation on RA 9184 Procurement Law	Sept. 8, 2016		8 Hrs.		ODAHRD
	ISO 9001-2008 Orientation & Writeshop Among Clerk & Secretaries	09/21/2015		8 Hrs.		ODAHRD
	Planning-Workshop: On the Preparation & Processing of Documents Relative to Procurement"	05/27/2015		4 Hrs.		SPMO
	Facilitating Skills Enhancement Seminar for Dormitory Advisers' and Assistant Dormitory Advisers'	Nov. 15, 2014	Nov. 15, 2014	8 Hrs.		USSO (Guidance Unit)
	Basic Facilitating Skills for Big Brothers & Dorm S.A.'s	Sept. 27, 2014	Sept. 27, 2014	8 Hrs.		USSO (Guidance Unit)
	Basic Facilitating Skills for Big Brothers & Dorm S.A.'s	Sept. 27, 2014	Sept. 27, 2014	8 Hrs.		USSO (Guidance Unit)
	Anti-Red Tape Law and CSC Policy on Cash Advances	Sept. 10, 2014	Sept. 10, 2014	8 Hrs.		HRMDO

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Typing, Filing, Watching Television & Listening Music		None		Administrative Personnel Association

(Continue on separate sheet if necessary)


SIGNATURE		DATE	
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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.
Prof. Manolo B. Loreto, Jr.	VSU, Visca Baybay City, Leyte	
Mrs. Marwen A. Castañeda, RGC.	VSU, Visca Baybay City, Leyte	
Ms. Chona A. Brit, RGC.	VSU, Visca Baybay City, Leyte	
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.		



Meriam M. Luna

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	 Signature (Sign inside the box) 6-18-2018 Date Accomplished
Government Issued ID: GSIS	
CRN-006-0073-8331-3 9560641355013	
Date/Place of Issuance: Tacloban City, Leyte	



SUBSCRIBED AND SWORN to before me this <u>JUN 25 2018</u> , affiant exhibiting his/her validly issued government ID as indicated above.	
 ATTY. RYSAN C. GUINOCOR VSU LEGAL OFFICER For Administering Oath	