

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.

I. PERSONAL INFORMATION			
2. SURNAME	BRIT		
FIRST NAME	CHONA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	AMPO		
3. DATE OF BIRTH (mm/dd/yyyy)	4/3/1975	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	TUNGA, LEYTE	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"/> Other/s:	17. RESIDENTIAL ADDRESS	APARTMENT 15 KILBOURNE DRIVE House/Block/Lot No. Street VSU CAMPUS Visca Subdivision/Village Barangay BAYBAY, CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.4 m	ZIP CODE	6521
8. WEIGHT (kg)	57		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	323 Gomez Street House/Block/Lot No. Street Brgy. San Antonio Subdivision/Village Barangay TUNGA LEYTE City/Municipality Province
10. GSIS ID NO.	CRN-006-0063-8374-L	ZIP CODE	6528
11. PAG-IBIG ID NO.	0801-0008385-02		
12. PHILHEALTH NO.	13-000014954-4		
13. SSS NO.	06-1484307-7	19. TELEPHONE NO.	NONE
14. TIN NO.	901-123-416	20. MOBILE NO.	09216147704
15. AGENCY EMPLOYEE NO.	20-189	21. E-MAIL ADDRESS (if any)	chona_brit05@yahoo.com.ph

II. FAMILY BACKGROUND				
22. SPOUSE'S SURNAME	BRIT		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ALLAN	NAME EXTENSION (JR., SR)	PAUL ANDRE A. BRIT	10/29/2003
MIDDLE NAME	MASUELA		CANDACE PAULINE A. BRIT	4/25/2011
OCCUPATION	LIVELIHOOD PROJECT OFFICER			
EMPLOYER/BUSINESS NAME	CATHOLIC RELIEF SERVICES			
BUSINESS ADDRESS	Catarman, Northern Samar			
TELEPHONE NO.	NONE			
24. FATHER'S SURNAME	AMPO			
FIRST NAME	LUCRECIO	JR.		
MIDDLE NAME	ECO			
25. MOTHER'S MAIDEN NAME				
SURNAME	URIBE			
FIRST NAME	LINA			
MIDDLE NAME	MALUBAY			
(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	TUNGA CENTRAL SCHOOL & JARO SPED CENTER	PRIMARY	6/1/1980	3/31/1986	GRADUATED	1986	With Honors	
SECONDARY	LEYTE NATIONAL HIGH SCHOOL	HIGHSCHOOL	6/1/1990	3/31/1990	GRADUATED	1990	NONE	
VOCATIONAL / TRADE COURSE	NONE	NONE	N.A.	N.A.	N.A.	N.A.	N.A.	
COLLEGE	UNIVERSITY OF SAN JOSE-RECOLETOS	BACHELOR OF ARTS IN PSYCHOLOGY	6/1/1992	3/31/1996	GRADUATED	1996	NONE	
GRADUATE STUDIES	UNIVERSITY OF SAN CARLOS	Masters in Education-Guidance & Counseling	6/1/2005	3/31/2014	GRADUATED	2014	NONE	
(Continue on separate sheet if necessary)								

SIGNATURE		DATE	April 25, 2017
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27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	CAREER SERVICE PROFESSIONAL	84.59	2/16/1997	University of Visayas, Cebu City	N.A.	N.A
	GUIDANCE COUNSELOR	81.80	8/18/2014	Metro Manila	0002561	4/3/2020

## V. WORK EXPERIENCE

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

[illegible]

(Continue on separate sheet if necessary)

**SIGNATURE**

DATE \_\_\_\_\_



## VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	VISCA FOUNDATION ELEMENTARY SCHOOL	7/1/2010	7/31/2012	16 hours/month	Business Manager & OIC Secretary
	HOLY SPIRIT PARISH	10/1/2014	Present	16 hours/month	Service Group Leader

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED	
1. Name of the program	
2. Duration of the program	
3. Description of the program	
4. How did you benefit from the program?	
5. How did you apply the knowledge/skills learned from the program?	
6. How did the program impact your business?	
7. How did the program impact your employees?	
8. How did the program impact your customers?	
9. How did the program impact your community?	
10. How did the program impact your industry?	
11. How did the program impact your country?	
12. How did the program impact the world?	

[illegible]

(Continue on separate sheet if necessary)

## VIII. OTHER INFORMATION

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	4/25/2017
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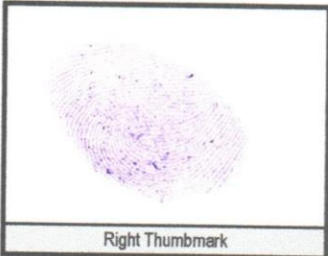
34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed, a. within the third degree? b. within the fourth degree (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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____ End of Contract & Resignation (Private agencies) _____
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	9176341432
MS. MARWEN A. CASTAÑEDA	VSU, Visca, Baybay City, Leyte	9776295216
JUNITO A. PANONCE	VSU, Visca, Baybay City, Leyte	9163230430

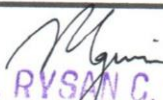
42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate 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: PRC License
ID/License/Passport No.: 0002561
Date/Place of Issuance: Tacloban City


Signature (Sign inside the box)
4/25/2017
Date Accomplished



SUBSCRIBED AND SWORN to before me this MAY 30 2017, affiant exhibiting his/her validly issued government ID as indicated above.

 ATTY. RYSAN C. GUINOCOR NOTARY PUBLIC UNTIL DECEMBER 31, 2017 PTR 0495868 - BAYBAY/LEYTE - 4/12/17 IBP 1030824 - TACLOBAN CITY - 12/19/16 MCLE COMP. NO. V-000850-07/20/15 ROLL OF ATTORNEYS NO. 57467
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