

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 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	dura		
FIRST NAME	antonio	NAME EXTENSION (JR., SR) JR.	
MIDDLE NAME	BARTOLINI		
3. DATE OF BIRTH (mm/dd/yyyy)	Oct. 5, 1977	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 Legle	If holder of dual citizenship, please indicate the details.	Philippines
5. SEX	<input checked="" type="checkbox"/> Male <input 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	House/Block/Lot No. Subdivision/Village Guadalupe City/Municipality City of Baybay 6521
7. HEIGHT (m)	176 cm.	ZIP CODE	
8. WEIGHT (kg)	90 kgs.	18. PERMANENT ADDRESS	House/Block/Lot No. Subdivision/Village Guadalupe City/Municipality City of Baybay 6521
9. BLOOD TYPE	B+	ZIP CODE	
10. GSIS ID NO.	2009790893	19. TELEPHONE NO.	563 - 7108
11. PAG-IBIG ID NO.	100802521901	20. MOBILE NO.	09057371294
12. PHILHEALTH NO.	03-05042422-9	21. E-MAIL ADDRESS (if any)	thurfox@gmail.com
13. SSS NO.	33-71014502		
14. TIN NO.	417-024-730		
15. AGENCY EMPLOYEE NO.	100894		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	dura	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ROSEMARE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	COBANDO		
OCCUPATION	HOUSEWIFE		
EMPLOYER/BUSINESS NAME	N/A		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	N/A		
24. FATHER'S SURNAME	dura (deceased)		
FIRST NAME	antonio	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ESGUERRA		
25. MOTHER'S MAIDEN NAME	PABLOQUEZ (deceased)		
SURNAME	dura		
FIRST NAME	HERMINIA		
MIDDLE NAME	BARTOLINI		

(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	Guadalupe Elem. School	Primary	1984	1990		1990	N/A
SECONDARY	San Jose Nat'l. High School	Secondary	1990	1996		1996	N/A
VOCATIONAL / TRADE COURSE	Talibon Tech						
COLLEGE	Visayas State Univ.	Tertiary	1996	2000		3rd yr. undergrad.	
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

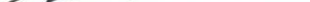
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(Continue on separate sheet if necessary)

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

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Aug. 28, 2018

I. VOLUNTARY WORK OR SERVICE WITH GOVERNMENT / PEOPLE VOLUNTARY ORGANIZATIONS					
29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	N/A				

(Continue on separate sheet if necessary)

II. LEARNING AND DEVELOPMENT (LAD) INTERVENTIONS/TRAINING PROGRAMS ATTENDED


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			
	Bomb threat & bomb identification seminar	08/20/2005	1 day	8 hrs.		Col. Paglinawan, F.
	Gun Safety Seminar	03/25/2005	1 day	8 hrs		Col. Isidro Sison PA
	Signature Verification training	05/25/2005	1 day	8 hrs		Dr. fely Lara PND crime Lab.
	Fire Prevention Seminar	03/30/2015	1 day	8 hrs		BFP Baybay
	Planning workshop: On the preparation & processing of Docs. relative to procurement	9/16/15	1 day	8 hrs		MS. Alice Flores Mr. Alex Tulin.
	Orientation on Basic Customer Service & work Values	9/16/17	1 day	8 hrs.		Dr. Lourdes Cano
	Procurement planning workshop	9/13/16	1 day	8 hrs.		MS. Vovella Dupac MS. Alice Flores



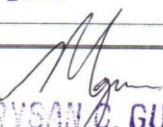
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III. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Cooking, Singing, Driving motorcycle watching TV.		N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	Aug. 28, 2018
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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.
Alicia M. Flores	Gradulope Baybay Lupa	
Dr. Roberto C. Grande	USU, Uica Baybay Lupa	
Jerry Posas	Marcos Baybay Lupa	
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: <u>V00894</u> ID/License/Passport No.: Date/Place of Issuance: <u>USU Baybay Lupa</u>	 Signature (Sign inside the box) <u>Aug. 28, 2018</u> Date Accomplished	 Right Thumbmark
SUBSCRIBED AND SWORN to before me this <u>SEP 10 2018</u> , affiant exhibiting his/her validly issued government ID as indicated above.		
 ATTY. RYSAN C. GUINOCOR VSU LEGAL OFFICER Person Administering Oath		