

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	DOÑOZ			
FIRST NAME	REX		NAME EXTENSION (JR., SR)	
MIDDLE NAME	RELOBA			
3. DATE OF BIRTH (mm/dd/yyyy)	5/31/1994	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	DOLORES, EASTERN SAMAR	If holder of dual citizenship, please indicate the details.		
5. SEX	<input 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)	1.68	17. RESIDENTIAL ADDRESS	132 SAN CARLOS House/Block/Lot No. Street 05 Subdivision/Village Barangay DOLORES EASTERN SAMAR City/Municipality Province	
8. WEIGHT (kg)	58		ZIP CODE 6521	
9. BLOOD TYPE	O+		18. PERMANENT ADDRESS	132 SAN CARLOS House/Block/Lot No. Street 05 Subdivision/Village Barangay DOLORES EASTERN SAMAR City/Municipality Province
10. GSIS ID NO.	NA			ZIP CODE 6817
11. PAG-IBIG ID NO.	NA			
12. PHILHEALTH NO.	01-052182330-0			
13. SSS NO.	34-5550755-3	19. TELEPHONE NO.	NA	
14. TIN NO.	500-522-739	20. MOBILE NO.	0916-143-5817	
15. AGENCY EMPLOYEE NO.	NA	21. E-MAIL ADDRESS (if any)	rexrelobadonoz@gmail.com	

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	NA		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NA	NAME EXTENSION (JR., SR)	NA	NA
MIDDLE NAME	NA		NOTHING FOLLOWS	
OCCUPATION	NA			
EMPLOYER/BUSINESS NAME	NA			
BUSINESS ADDRESS	NA			
TELEPHONE NO.	NA			
24. FATHER'S SURNAME	DOÑOZ			
FIRST NAME	ESMERALDO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	COLES			
25. MOTHER'S MAIDEN NAME				
SURNAME	RELOBA			
FIRST NAME	REBECCA			
MIDDLE NAME	CAMILO		(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	SCHOLARS HIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	DOLORES CENTRAL ELEMENTARY SCHOOL	ELEMENTARY	2001	2006	N/A	2006	NONE
SECONDARY	DOLORES NATIONAL HIGH SCHOOL	SECONDARY	2006	2010	N/A	2010	NONE
VOCATIONAL / TRADE COURSE	NA	NA	NA	NA	NA	NA	NONE
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN GEODETIC ENGINEERING	2010	2015	NA	2015	DOST- SEI
GRADUATE STUDIES	NA	NA	NA	NA	N/A	N/A	N/A

IV. CIVIL SERVICE ELIGIBILITY

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
	GEODETIC ENGINEERING LICENSURE EXAMINATION	89.8	Otober 13-14, 2015	ST. JUDE COLLEGE MANILA	9374	5/31/2021
	PROFESSIONAL DRIVER'S LICENSE		9/25/2017	LTO PUERTO PRINCESA CITY	D1117006138	


(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.

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	7/16/19	CS FORM 212 (Revised 2017), Page 2 of 4
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / 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		
	DOÑOZ et. al.,/ Dolores, Eastern Samar	11/1/2018	Present		GIS Consultant/ Thematic Mapping for the Municipality of Dolores Eastern Samar

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

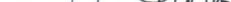
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(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
SURVEYING	NA	GEODETIC ENG. OF THE PHIL., INC (GEPI)
MAP-MAKING		VISAYAS STATE UNIVERSITY ALUMNI ASSOCIATION (VSUAA)
DATA MANAGEMENET AND ANALYSIS		PHILIPPINE ALLIANCE OF LABORATORY EQUIPMENT USERS (PALEU)
PROGRAMMING		VISAYAS STATE UNIVERSITY FACULTY ASSOCIATION (VSUFA)

(Continue on separate sheet if necessary)

SIGNATURE		DATE	7/16/16	CS FORM 212 (Revised 2017), Page 3 of 4
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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)?

☐ YES

☒ NO

☐ YES

☒ 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?

☐ YES

☒ NO

If YES, give details:

☐ YES

☒ 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?

☐ YES

☒ 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?

☒ YES

☐ NO

If YES, give details:

Resignation from Ipilan Nickel Corporation

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?

☐ YES

☒ NO

If YES, give details:

☐ YES

☒ NO

If YES, give details:

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES

☒ 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?

☐ YES

☒ NO

If YES, please specify:

☐ YES

☒ NO

If YES, please specify ID No:

☐ YES

☒ NO

If YES, please specify ID No:

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
ENGR. FERDINAND R. LIBATIQUE	LA UNION	
ALEX C. ARABIS	LILLOAN, CEBU	
ENGR. DIANA CHRISTA G. MILLOZA	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.



Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: PhilHealth

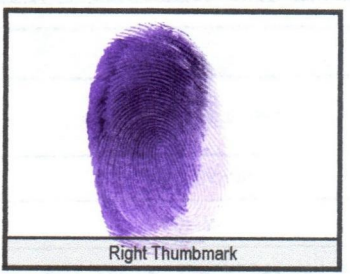
ID/License/Passport No.: 01-052182330-0

Date/Place of Issuance: PUERTO PRINCESA CITY 11/2017

Signature (Sign inside the box)

7/19/19

Date Accomplished



SUBSCRIBED AND SWORN to before me this 19 AUG 2019, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. RYSAN O. GUINOCOR

VS. LEGAL OFFICER

Person Administering Oath