

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	PADERES		
FIRST NAME	VERONICO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ROSAL		
3. DATE OF BIRTH (mm/dd/yyyy)	10 / 19 / 1963	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	Buñavita, Bontoc so. Iyuk	If holder of dual citizenship, please indicate the details.	
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"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street Subdivision/Village BAYBAY MARCOS City/Municipality Leyte Province
7. HEIGHT (m)	1.65 m	ZIP CODE	6521
8. WEIGHT (kg)	50	18. PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village BAYBAY MARCOS City/Municipality Leyte Province
9. BLOOD TYPE	O	ZIP CODE	6521
10. GSIS ID NO.		19. TELEPHONE NO.	
11. PAG-IBIG ID NO.	1212 - 0366 - 1380	20. MOBILE NO.	09367566629
12. PHILHEALTH NO.	13 - 00010 3498 - 8	21. E-MAIL ADDRESS (if any)	
13. SSS NO.			
14. TIN NO.	116 - 626 - 123		
15. AGENCY EMPLOYEE NO.			

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	PADERES		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	MA. CORAZON	NAME EXTENSION (JR., SR)	RONEL B. PADERES	May 8, 1989
MIDDLE NAME	BAGARINAO		ROCHELLE JOY B. PADERES	Nov. 13, 1990
OCCUPATION	HOUSEWIFE		RUFFA JANE B. PADERES	May 16, 1992
EMPLOYER/BUSINESS NAME			ROMAN B. PADERES	April 25, 1994
BUSINESS ADDRESS			RONETTE MAY B. PADERES	March 07, 1996
TELEPHONE NO.				
24. FATHER'S SURNAME	PADERES			
FIRST NAME	AGATON	NAME EXTENSION (JR., SR)		
MIDDLE NAME	NARTE			
25. MOTHER'S MAIDEN NAME				
SURNAME	PADERES			
FIRST NAME	MONICA			
MIDDLE NAME	ROSAL			

(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	SAN AGUSTINE ELEMENTARY SCHOOL		1971	1976		1976	
SECONDARY	VISCA		1976	1978	SECOND YEAR		
VOCATIONAL / TRADE COURSE							

[illegible]

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

(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	November 7, 2018


34. Are you related by consanguinity or affinity to 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.
Engr. Mario Lillo P. Valenzona	VSU, GSD, Baybay City	None
Engr. Marion Buralas	VSU, GSD, Baybay City	None
Mr. Remigio Sanico	VSU, HELVU, Baybay City	None

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:	Unified Multi-Purpose
ID/License/Passport No.:	CRN-006-0017-6658-3
Date/Place of Issuance:	Tacloban City


Signature (Sign inside the box)
NOV 8, 2018
Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this NOV 8 2018, affiant exhibiting his/her validly issued government ID as indicated above.

 ATTY. RYSAN C. GUINOCOR VSU LEGAL OFFICER Person Administering Oath
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