

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 () ☐ 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	SIAREZ		
FIRST NAME	JOE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	NONE		
3. DATE OF BIRTH (mm/dd/yyyy)	10/25/1976	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	CEBU CITY	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"/> Other/s:	17. RESIDENTIAL ADDRESS	Apartment 41 Kilbourne Drive House/Block/Lot No. Street VSU Pangasugan Subdivision/Village Barangay Baybay City Leyte City/Municipality Province 6521
7. HEIGHT (m)	5'4"	ZIP CODE	6521
8. WEIGHT (kg)	82 kgs.		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	Apartment 41 Kilbourne Drive House/Block/Lot No. Street VSU Pangasugan Subdivision/Village Barangay Baybay City Leyte City/Municipality Province 6521
10. GSIS ID NO.		ZIP CODE	6521
11. PAG-IBIG ID NO.	1211-8025-6219		
12. PHILHEALTH NO.	13-202028804-7	19. TELEPHONE NO.	NONE
13. SSS NO.	N/A		
14. TIN NO.	479-945-703	20. MOBILE NO.	0923 457 6168
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	siarez.joe76@gmail.com

II. FAMILY BACKGROUND				
22. SPOUSE'S SURNAME	SIAREZ		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	MILDRED	NAME EXTENSION (JR., SR)	CLIVE JOSHUA MORALDE	06/02/1997
MIDDLE NAME	MERGAL		SHAWN KYLE MORALDE	06/01/2002
OCCUPATION	TEACHER		ANTOINETTE JOSEPHINE M. SIAREZ	09/01/2008
EMPLOYER/BUSINESS NAME	VISAYAS STATE UNIVERSITY		RAYNE NIÑA KIRSTEN M. SIAREZ	01/29/2010
BUSINESS ADDRESS	VISCA, BAYBAY CITY, LEYTE		FRANCES MARIAN M. SIAREZ	03/18/2013
TELEPHONE NO.				
24. FATHER'S SURNAME	MORALDE			
FIRST NAME	JOSE PABLO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	BATTUNG			
25. MOTHER'S MAIDEN NAME				
SURNAME	SIAREZ			
FIRST NAME	ANTONIA			
MIDDLE NAME	LABAO		(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	UNIVERSITY OF SAN CARLOS-GIRLS HIGH	ELEMENTARY EDUCATION	06/05/1984	04/30/1991		1991	
SECONDARY	ALTERNATIVE LEARNING SYSTEM	SECONDARY EDUCATION	06/25/2010	03/25/2011		2011	
VOCATIONAL / TRADE COURSE							
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF ANIMAL SCIENCE	06/10/2017	09/25/2021		2021	
GRADUATE STUDIES							
(Continue on separate sheet if necessary)							
SIGNATURE		DATE		December 17, 2024			

[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	December 17, 2024	
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[illegible]

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

[illegible]

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	DRIVING				MEMBER- HSP COMMISSION ON WORSHIP
	COOKING				YOUTH CHAPTER COORDINATOR- MFC YOUTH VSU CHAPTER
	GARDENING				V

SIGNATURE		DATE	December 17, 2024
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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: _____

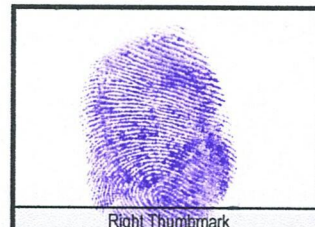
41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)		
NAME	ADDRESS	TEL. NO.
Dr. Jose Bacusmo	Sta. Cruz, Baybay City, Leyte	09686906880
Dr. Ulysses Cagasan	VSU, Baybay City, Leyte	09452309477
Dr. Lijueraj J. Cuadra	VSU, Baybay City, Leyte	09567922509

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: LTO LICENSE
ID/License/Passport No.: H-12-16-000539
Date/Place of Issuance: Baybay City, Leyte

Signature (Sign inside the box)
December 11, 2024
Date Accomplished



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

Signature
Person Administering Oath

WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

- Duration: June 2009 - Present
- Position: Van Driver/ 4 wheel Driver
- Name of Office/Unit: St. Anthony Rent a Car
- Immediate Supervisor: Anthony Lambert
- Name of Agency/Organization and Location: St. Anthony Rent a Car, Baybay City, Leyte

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- Summary of Actual Duties

. Drive light vehicles

. Maintains the vehicle to ensure road worthiness and good running condition.

. Assist co-workers in trouble shooting and maintenance.


JOE SIAREZ

(Signature over Printed Name
of Employee/Applicant)

Date: 12/17/24