

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	BARTOLINI		
FIRST NAME	MANUEL	NAME EXTENSION (JR., SR)	
MIDDLE NAME	CUARENTA		
3. DATE OF BIRTH (mm/dd/yyyy)	May 4, 1960	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: Philippine
4. PLACE OF BIRTH	Baybay, Leyte	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"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	Zone 1 House/Block/Lot No. _____ Street _____ Guadalupe Subdivision/Village _____ Barangay _____ Baybay City _____ Leyte City/Municipality _____ Province _____ 6521
7. HEIGHT (m)	1.66 m	18. PERMANENT ADDRESS	Zone 1 House/Block/Lot No. _____ Street _____ Guadalupe Subdivision/Village _____ Barangay _____ Baybay City _____ Leyte City/Municipality _____ Province _____ 6521
8. WEIGHT (kg)	66.5 (kg)		
9. BLOOD TYPE	"B"		
10. GSIS ID NO.	B60J4MCB038		
11. PAG-IBIG ID NO.	0801-01824-11	19. TELEPHONE NO.	(053) 563-7428
12. PHILHEALTH NO.	13-000014468-2	20. MOBILE NO.	/ 09753524084
13. SSS NO.	None	21. E-MAIL ADf .com	manuelbartolini8@yahoo.com
14. TIN NO.	104-031-265		
15. AGENCY EMPLOYEE NO.	V00571		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Bartolini		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Cilla	NAME EXTENSION (JR., SR)	Nijela Ciedelle R. Bartolini	May 31, 2001
MIDDLE NAME	Ramada			
OCCUPATION	Plain house wife			
EMPLOYER/BUSINESS NAME	None			
BUSINESS ADDRESS	None			
TELEPHONE NO.	None			
24. FATHER'S SURNAME	Bartolini (Deceased)			
FIRST NAME	Alvaro	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Valenzona			
25. MOTHER'S MAIDEN NAME	Bartolini (Deceased)			
SURNAME	Cuarenta			
FIRST NAME	Tomas			
MIDDLE NAME	Abanera			

(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 Community School	Primary Education	1967	1975		1975	None
SECONDARY	Experimental Rural High School	High School Graduate	1975	1978		1978	None
VOCATIONAL / TRADE COURSE	Franciscan Coll of the Immaculate Conception	Junior Secretarial Course Graduate	1980	1982		1982	None
COLLEGE	Franciscan Coll of the Immaculate Conception	BS in Commerce Graduate	1986	1991		1991	None
GRADUATE STUDIES	None	None	None	None		None	None

(Continue on separate sheet if necessary)

SIGNATURE		DATE	June 29, 2018
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IV. CIVIL SERVICE ELIGIBILITY		V. WORK EXPERIENCE	
CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE	BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFIRMATION
PLACE OF EXAMINATION / CONFIRMATION	NUMBER	DATE OF VALIDITY	DATE OF VALIDITY
N/A			
(Continue on separate sheet if necessary)			

VI. WORK EXPERIENCE		VII. WORK EXPERIENCE	
CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE	BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFIRMATION
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N/A			
(Continue on separate sheet if necessary)			

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PLACE OF EXAMINATION / CONFIRMATION	NUMBER	DATE OF VALIDITY	DATE OF VALIDITY
N/A			
(Continue on separate sheet if necessary)			

VI. VOLUNTARY WORK OR INVOLVEMENT IN C... NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATIONS

[illegible]

(Continue on separate sheet if necessary)

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

[illegible]

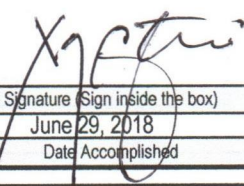
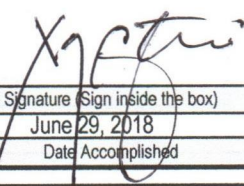
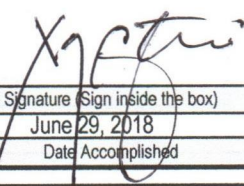

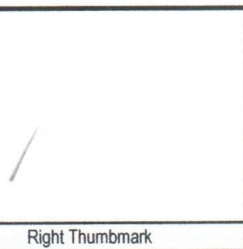

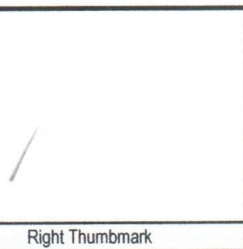

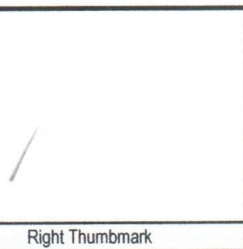



(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE	<i>[Signature]</i>	DATE	June 29, 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)													
<table><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>Dr. Edgardo E. Tulin, Ph.D</td><td>VSU, Visca, Baybay City, Leyte</td><td>563-7067</td></tr><tr><td>Engr. Eliezer L. Velasco</td><td>Baybay City, Leyte</td><td>563-7428</td></tr><tr><td>Mrs. Teresita L. Quiñanola</td><td>Baybay City, Leyte</td><td></td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	Dr. Edgardo E. Tulin, Ph.D	VSU, Visca, Baybay City, Leyte	563-7067	Engr. Eliezer L. Velasco	Baybay City, Leyte	563-7428	Mrs. Teresita L. Quiñanola	Baybay City, Leyte	
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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.													
<table><tr><td>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID: VSU</td></tr><tr><td>ID/License/Passport No.: V000571</td></tr><tr><td>Date/Place of Issuance: January 2, 2010 - VSU, Visca, Baybay City, Leyte</td></tr></table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	Government Issued ID: VSU	ID/License/Passport No.: V000571	Date/Place of Issuance: January 2, 2010 - VSU, Visca, Baybay City, Leyte	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>June 29, 2018</td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	June 29, 2018	Date Accomplished				
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SUBSCRIBED AND SWORN to before me this <u>JUL 02 2018</u> , affiant exhibiting his/her validly issued government ID as indicated above.													
<table><tr><td></td></tr><tr><td>EDGARDO E. TULIN</td></tr><tr><td>Person Administering Oath</td></tr></table>			EDGARDO E. TULIN	Person Administering Oath									
													
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