

## 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	ALVAREZ		
FIRST NAME	CORAZON	NAME EXTENSION (JR., SR) NA	
MIDDLE NAME	LOVETE		
3. DATE OF BIRTH (mm/dd/yyyy)	07/26/1989	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	STA. MARIA, BULACAN	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" 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:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street GABAS Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.6 METERS	ZIP CODE	
8. WEIGHT (kg)	58	18. PERMANENT ADDRESS	House/Block/Lot No. Street GABAS Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
9. BLOOD TYPE	B	ZIP CODE	6521
10. GSIS ID NO.	02004200506	19. TELEPHONE NO.	NA
11. PAG-IBIG ID NO.	121093269748	20. MOBILE NO.	09268463483
12. PHILHEALTH NO.	13-000104962-4	21. E-MAIL ADDRESS (if any)	corazonalvarez26@gmail.com
13. SSS NO.	06 3265253 8		
14. TIN NO.	419 969 323		
15. AGENCY EMPLOYEE NO.	V000743		

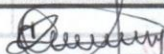
## II. FAMILY BACKGROUND

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
MIDDLE NAME	NA		
OCCUPATION	NA		
EMPLOYER/BUSINESS NAME	NA		
BUSINESS ADDRESS	NA		
TELEPHONE NO.	NA		
24. FATHER'S SURNAME	ALVAREZ (DECEASED)		
FIRST NAME	ARNULFO	NAME EXTENSION (JR., SR) SR	
MIDDLE NAME	TURNO		
25. MOTHER'S MAIDEN NAME	LOVETE		
SURNAME	SOFRONIA		
FIRST NAME	MISA		
MIDDLE NAME	(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	BATO CENTRAL SCHOOL	NA	1995	2001	NA	2001	none
SECONDARY	BATO SCHOOL OF FISHERIES	NA	2001	2005	NA	2005	With Honors
VOCATIONAL / TRADE COURSE	NA	NA			NA	NA	NA
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF ELEMENTARY EDUCATION	2005	2009	NA	2009	Cum Laude
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF EDUCATION Major in ENGLISH	2009	2017	NA	2017	none
	SILLIMAN UNIVERSITY	Doctor of Philosophy in English Major in Teaching English to Speakers of Other Languages	2017	present	39 units	NA	VSU Fellowship Grant

(Continue on separate sheet if necessary)

SIGNATURE		DATE	February 7, 2019
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## 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
	PD 907 – Honor Graduate	NA	NA	NA	NA	NA
	Licensure Examination for Teachers	83	10/4/2009; 12/17/2010	Tacloban City, Leyte	1048233	7/26/2020

(Continue on separate sheet if necessary)

## V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	February 7, 2010
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<b>NAME &amp; ADDRESS OF ORGANIZATION</b> <small>(Write in full)</small>	<b>INCLUSIVE DATES</b> <small>(mm/dd/yyyy)</small>		<b>NUMBER OF HOURS</b>	<b>POSITION / NATURE OF WORK</b>
	<b>From</b>	<b>To</b>		
NA [ ] YES [ ]	NA	NA	NA	NA
[ ] NO [ ] YES [ ]				
If YES, describe:				
[ ] NO [ ] YES [ ]				
If YES, describe:				

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

[illegible]

VIII. OTHER INFORMATION

	NON-ACADEMIC DISTINCTIONS / RECOGNITION	MEMBERSHIP IN ASSOCIATION/ORGANIZATION
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(Continue on separate sheet if necessary)

February 7, 2019



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)?

35. a. Have you ever been found guilty of any administrative offense?

b. Have you been criminally charged before any court?

36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?

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?

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?

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

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

NAME	ADDRESS	TEL. NO.
Dr. Annie P. Gravoso	Visca, Baybay City, Leyte	NA
Dr. Lijueraj J. Cuadra	Visca, Baybay City, Leyte	NA
Dr. Ruth L. Martinez	Visca, Baybay City, Leyte	NA

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.



PHOTO

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

Government Issued ID: School ID

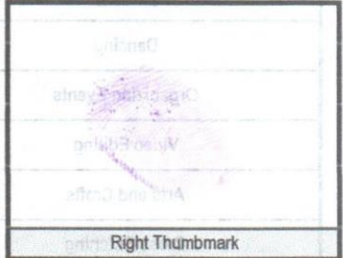
ID/License/Passport No.: V000743

Date/Place of Issuance: 03/2012 VSU, Visca, Baybay, Leyte

Signature (Sign inside the box)

02/07/2019

Date Accomplished



SUBSCRIBED AND SWORN to before me this **FEB 1 2 2019**, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. RYSA L. C. GUINOCOR

Person Administering Oath