

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	VILLAFUERTE		
FIRST NAME	JENELYN	N/A	
MIDDLE NAME	SOSMEÑA		
3. DATE OF BIRTH (mm/dd/yyyy)	15.11.95	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization
4. PLACE OF BIRTH	HILUSIG, MAHAPLAG LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	Philippines	
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	
7. HEIGHT (m)	1.5		BRGY. BUNGA BAYBAY CITY, LEYTE
8. WEIGHT (kg)	52	ZIP CODE	6521
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	
10. GSIS ID NO.	2005462244		BRGY. MALIGAYA MAHAPLAG LEYTE
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	13-025514505-4	ZIP CODE	6512
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A
14. TIN NO.	350-970-549	20. MOBILE NO.	0997-839-5709
15. AGENCY EMPLOYEE NO.	V01096	21. E-MAIL ADDRESS (if any)	villafuertejenelyn16@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	VILLAFUERTE			
FIRST NAME	JUDY	N/A		
MIDDLE NAME	COMALING			
25. MOTHER'S MAIDEN NAME				
SURNAME	SOSMEÑA			
FIRST NAME	CESARIA			
MIDDLE NAME	BASILISCO			

(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	HILUSIG ELEMENTARY SCHOOL	PRIMARY EDUCATION	2002	2008	N/A	2008	NA
SECONDARY	MAHAPLAG NATIONAL HIGH SCHOOL	HIGH SCHOOL	2010	2014	N/A	2014	VALEDICTORIAN
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY EDUCATION major in MATHEMATICS	2014	2018	N/A	2018	CUM LAUDE
GRADUATE STUDIES	LEYTE NORMAL UNIVERSITY	Master in Education- Major in Mathematics	2019	2019	9 units	N/A	N/A

(Continue on separate sheet if necessary)


SIGNATURE		DATE	JANUARY 14, 2020
-----------	---	------	------------------




[illegible]

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

[illegible]

<b>SIGNATURE</b>		<b>DATE</b>	JANUARY 14, 2020
------------------	---	-------------	------------------



JANUARY 14, 2020



## VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

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

[illegible]

(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)
COOKING			N/A		N/A
GARDENING					
HAND CRAFTING					

(Continue on separate sheet if necessary)

<b>SIGNATURE</b>		<b>DATE</b>	JANUARY 14, 2020
------------------	---	-------------	------------------



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.
IRISH S. COCO	VISAYAS STATE UNIVERSITY	99362912476
JOY ANN A. CANETE	LAPU-LAPU CEBU CITY	9224631719
LOVELY MAE J. ESTOR	BAYBAY CITY	9069636752

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.



JENELYN S. VILLAFUERTE

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: TIN

ID/License/Passport No.: 350-970-549

Date/Place of Issuance: 10/12/18

Signature (Sign inside the box)

JANUARY 14, 2020

Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this FEB 10 2020, affiant exhibiting his/her validly issued government ID as indicated above.

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