

# 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	MUAÑA		
FIRST NAME	ROGER	NAME EXTENSION (JR., SR)	
MIDDLE NAME	TORCINO		
3. DATE OF BIRTH (mm/dd/yyyy)	03-01-1973	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	BAYBAY 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"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	
7. HEIGHT (m)	1.63		House/Block/Lot No. Street SITIO LONOY SAN ISIDRO Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
8. WEIGHT (kg)	64	ZIP CODE	6521-A
9. BLOOD TYPE		18. PERMANENT ADDRESS	
10. GSIS ID NO.	BP 2004559002 (021-1942-5911-4)		House/Block/Lot No. Street SITIO LONOY SAN ISIDRO Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
11. PAG-IBIG ID NO.	915232591031	ZIP CODE	6521-A
12. PHILHEALTH NO.	13-0500062862-7		
13. SSS NO.	06-2325840-4	19. TELEPHONE NO.	NONE
14. TIN NO.	286-657-374-000	20. MOBILE NO.	09263177821
15. AGENCY EMPLOYEE NO.	V00844	21. E-MAIL ADDRESS (if any)	NONE

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	MUAÑA		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ELMA	NAME EXTENSION (JR., SR) III	REGINNE D. MUAÑA	11-06-2002
MIDDLE NAME	DALANON		SARAH JEAN D. MUAÑA	08-07-2005
OCCUPATION	HOUSEWIFE		CHARISE D. MUAÑA	01-03-2013
EMPLOYER/BUSINESS NAME	N/A		CHARLINE D. MUAÑA	08-12-2016
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	MUAÑA			
FIRST NAME	TOMAS	NAME EXTENSION (JR., SR) SENIOR		
MIDDLE NAME	BASARTE			
25. MOTHER'S MAIDEN NAME				
SURNAME	TORCINO			
FIRST NAME	ANGELITA			
MIDDLE NAME	SURINGA			

(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	CARLOS P. GARCIA ELEMENTARY SCHOOL	PRIMARY EDUCATION	1990	1996		1996	NONE
SECONDARY	RAYRAY NATIONAL HIGH SCHOOL	HIGH SCHOOL	1996	1999		1999	NONE
VOCATIONAL / TRADE COURSE	CONCORD TECHNICAL INSTITUTE	AUTOMOTIVE MECHANIC	1993	1994		1994	NONE
COLLEGE	NONE						
GRADUATE STUDIES	NONE						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	12-12-2019
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[illegible]

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

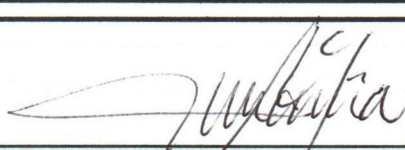
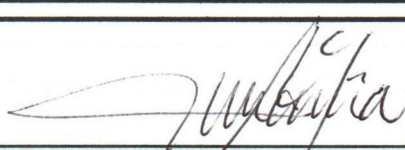
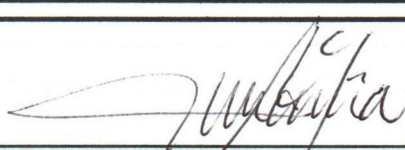



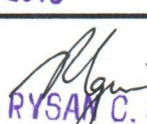
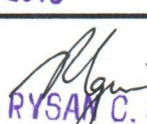
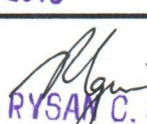
(Continue on separate sheet if necessary)			
SIGNATURE		DATE	12-12-2019

[illegible]

(Start from the most recent L&D training program and include only the relevant L&D training taken for the last five (5) years for Division Chief/Executive Managerial positions)

[illegible][illegible]

12-12-2019

<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>Status of Case/s: _____</p>												
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>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?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>												
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>												
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 33%;">NAME</th><th style="width: 33%;">ADDRESS</th><th style="width: 33%;">TEL. NO.</th></tr></thead><tbody><tr><td>DR. HENRY Y. GOLTIANO</td><td>VISAYAS STATE UNIVERSITY</td><td>09086866102</td></tr><tr><td>ENGR. CELSO GUMAOD</td><td>VISAYAS STATE UNIVERSITY</td><td>09176341532</td></tr><tr><td>MS. ALICE FLORES</td><td>VISAYAS STATE UNIVERSITY</td><td></td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	DR. HENRY Y. GOLTIANO	VISAYAS STATE UNIVERSITY	09086866102	ENGR. CELSO GUMAOD	VISAYAS STATE UNIVERSITY	09176341532	MS. ALICE FLORES	VISAYAS STATE UNIVERSITY	
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<p>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.</p>													
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td></tr><tr><td colspan="2">PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID:</td><td>DRIVER'S LICENSE</td></tr><tr><td>ID/License/Passport No.:</td><td>G01-94-179776</td></tr><tr><td>Date/Place of Issuance:</td><td>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:	DRIVER'S LICENSE	ID/License/Passport No.:	G01-94-179776	Date/Place of Issuance:	BAYBAY CITY, LEYTE	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: center;"> Signature (Sign inside the box) 12 - 12 - 2019 Date Accomplished</td></tr></table>	 Signature (Sign inside the box) 12 - 12 - 2019 Date Accomplished	
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<p>SUBSCRIBED AND SWORN to before me this <u>16 DEC 2019</u>, affiant exhibiting his/her validly issued government ID as indicated above.</p> <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: center;"> <b>ATTY. RYSAN C. GUINOCOR</b> VSU LEGAL OFFICER Person Administering Oath</td></tr></table>		 <b>ATTY. RYSAN C. GUINOCOR</b> VSU LEGAL OFFICER Person Administering Oath											
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