

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	OTIDA		
FIRST NAME	LEONARDA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	PIZA		
3. DATE OF BIRTH (mm/dd/yyyy)	November 07, 1955	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, Marikina, Baybay City	If holder of dual citizenship, please indicate the details.	Philippines
5. SEX	<input type="checkbox"/> Male <input checked="" 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	Jose Abad Santos St. House/Block/Lot No. Street Zone 6 Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
7. HEIGHT (m)	5'1"	ZIP CODE	6521
8. WEIGHT (kg)	48 kls		
9. BLOOD TYPE	"B"	18. PERMANENT ADDRESS	House/Block/Lot No. Street Zone 6 Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
10. GSIS ID NO.	B55X7LP0018	ZIP CODE	6521
11. PAG-IBIG ID NO.	1700-0025-7189		
12. PHILHEALTH NO.	130 000 155 3682		
13. SSS NO.	N.A	19. TELEPHONE NO.	none
14. TIN NO.	116-626-077	20. MOBILE NO.	0915-2329-313
15. AGENCY EMPLOYEE NO.	V000640	21. E-MAIL ADDRESS (if any)	leonardaotida@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	OTIDA		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	GENARO	NAME EXTENSION (JR., SR)	IAN PIZA OTIDA	12-07-85
MIDDLE NAME	VALENZONA		IRENE JOY PIZA OTIDA	08-05-90
OCCUPATION	SELF EMPLOYED			
EMPLOYER/BUSINESS NAME	NONE			
BUSINESS ADDRESS	NONE			
TELEPHONE NO.	NONE			
24. FATHER'S SURNAME	PIZA			
FIRST NAME	IRENEO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	PERNITES			
25. MOTHER'S MAIDEN NAME				
SURNAME	MAGAN			
FIRST NAME	NORBERTA			
MIDDLE NAME	ALTIVO			

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	BAYBAY EAST CENTRAL SCHOOL, Baybay,Leyte	Elementary Graduate	1664	1669	Elem Grad	1969	none
SECONDARY	Baybay High School	High School Graduate	1969	1977	High School Graduate	1977	none
VOCATIONAL / TRADE COURSE							
COLLEGE	Franciscan College of Immaculate Conception	Bachelor of Science in Commerce & 2 years Secretrial	1995	1999	College Graduate	1999	none
GRADUATE STUDIES							

SIGNATURE		DATE
LEONARDA P. OTIDA		A-25-17

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
Data Encoder Mc#11	72.80	April 7, 1999	TESDA, Tacloban City	2680381	1999

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

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

28.	INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable) & STEP (Format *00-0*) INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/ N)
	From	To						
	01-01-17	Present	Adm. Aide III	Accounting Office, VSU, Baybay City	136,644.00	3	Permanent	Yes
	11-02-16	12-31-16	Adm. Aide III	Accounting Office, VSU, Baybay City	130,596.00	3	Permanent	Yes
	01-01-16	11-01-16	Adm. Aide III	Accounting Office, VSU, Baybay City	494.68	3	C	Yes
	01-01-14	12-31-15	Adm. Aide III	Accounting Office, VSU, Baybay City	472.77	3	C	Yes
	07-01-13	12-31-13	Adm. Aide III	Accounting Office, VSU, Baybay City	437.64	3	C	Yes
	01-01-11	06-30-13	Adm. Aide III	Accounting Office, VSU, Baybay City	402.45	3	C	Yes
	01-01-10	12-31-10	Adm. Aide III	Accounting Office, VSU, Baybay City	367.27	3	C	Yes
	07-01-2008	12-31-2009	Adm. Aide III	Accounting Office, VSU, Baybay City	331.14	3	C	Yes
	07-01-2007	06-30-2008	Adm. Aide III	Accounting Office, VSU, Baybay City	301.95	3	C	Yes
	03-01-2004	06-30-2007	Adm. Aide III	Accounting Office, LSU, Baybay City	274.50	3	C	Yes
	01-01-2004	02-29-2004	Adm. Aide III	Accounting Office, LSU, Baybay City	274.50	3	C	Yes
	01-01-2003	12-31-2003	Adm. Aide III	Accounting Office, LSU, Baybay City	274.50	3	C	Yes
	01-01-2002	12-31-2002	Adm. Aide III	Accounting Office, LSU, Baybay City	274.50	3	C	Yes
	07-01-2001	12-31-2001	Adm. Aide III	Accounting Office, ViSCA, Baybay City	274.50	3	C	Yes
	07-01-2000	06-30-2001	Adm. Aide III	Accounting Office, ViSCA, Baybay City	261.41	3	C	Yes
	01-01-1999	12-31-1999	Adm. Aide III	Accounting Office, ViSCA, Baybay City	237.64	3	C	Yes
	01-01-1998	12-31-1998	Clerk 1	Accounting Office, ViSCA, Baybay City	237.64	3	C	Yes
	01-01-1997	12-31-1997	Clerk 1	Accounting Office, ViSCA, Baybay City	237.64	3	C	Yes
	01-01-1996	12-31-1996	Clerk 1	Accounting Office, ViSCA, Baybay City	237.64	3	C	Yes
	01-01-1995	12-31-1995	Clerk 1	Accounting Office, ViSCA, Baybay City	179.82	3	C	Yes
	01-01-1994	12-31-1994	Clerk 1	Accounting Office, ViSCA, Baybay City	134.36	3	C	Yes
	01-01-1993	12-31-1993	Clerk 1	Accounting Office, ViSCA, Baybay City	98.00	3	C	Yes
	01-01-1992	12-31-1992	Clerk 1	Accounting Office, ViSCA, Baybay City	98.00	3	C	Yes
	01-01-1991	12-31-1991	Clerk 1	Accounting Office, ViSCA, Baybay City	98.00	3	C	Yes
	07-01-1989	12-31-1990	Clerk 1	Accounting Office, ViSCA, Baybay City	98.00	3	C	Yes
	12-14-1987	06-30-1989	Clerk 1	Physical Plant Office	32.85	3	C	Yes
	03-01-1987	12-13-1987	Clerical Aide	Physical Plant Office	22.90	3	C	Yes
	07-01-1986	02-28-1987	-do-	Physical Plant Office	19.90	3	C	Yes
	01-01-1985	06-30-1986	-do-	Physical Plant Office	18.10	3	C	Yes
	05-01-1984	12-31-1984	-do-	Physical Plant Office	16.45	3	C	Yes
	03-01-1982	04-30-1984	-do-	Physical Plant Office	14.95	3	C	Yes
	08-10-1981	02-28-1982	-do-	Physical Plant Office	13.00	3	C	Yes

(Continue on separate sheet if necessary)

SIGNATURE	<div>  LEONILDA P. ORIDA </div>	DATE	A-25-17
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[illegible]

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

(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]

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
sewing	none	Administrative Personnel Association

SIGNATURE	LEONARDA P. OTIDA <i>leotida</i>	DATE	A-25-17
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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: _____

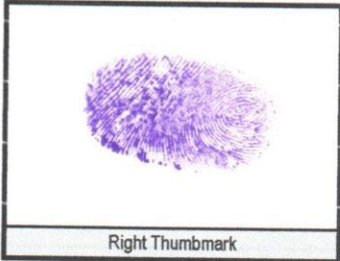
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
Ms. LOELLA C. AMPAC	Office of Director of Finance	none
Ms. ERLINDA S. ESGUERRA	ACCTG. DIVISION VISCA BAYBAY, LEYTE	none
Ms. ANITA G. GODOY	Budget Office VISCA BAYBAY, LEYTE	none
42. I declare 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.		



LEONARDA P. OTIDA
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:	VOO0640
ID/License/Passport No.:	none
Date/Place of Issuance:	VISCA, BAYBAY CITY, LEYTE

LEONARDA P. OTIDA
Signature (Sign inside the box)
Date Accomplished



SUBSCRIBED AND SWORN to before me this APR 25 2017, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. RYAN C. GUINOCOR
Person Administering Oath

PTB 049-869-BAYBAY/LEYTE-4/25/17
IBP 1030824-TAGLOBAN CITY-12/19/16
MOLE COMP. NO. V-0002580-07/20/15