

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	REOMA		
FIRST NAME	REY MARTIN	NAME EXTENSION (JR., SR)	
MIDDLE NAME	LUMBRE		
3. DATE OF BIRTH (mm/dd/yyyy)	11/08/1992	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, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	RIZAL House/Block/Lot No. Street PUROK-1 BARANGAY RIZAL Subdivision/Village Barangay SOGOD SOUTHERN LEYTE City/Municipality Province
7. HEIGHT (m)	1.67	ZIP CODE	6606
8. WEIGHT (kg)	75		
9. BLOOD TYPE	"O"	18. PERMANENT ADDRESS	RIZAL House/Block/Lot No. Street PUROK-1 BARANGAY RIZAL Subdivision/Village Barangay SOGOD SOUTHERN LEYTE City/Municipality Province
10. GSIS ID NO.		ZIP CODE	6606
11. PAG-IBIG ID NO.	121091171772		
12. PHILHEALTH NO.	12-051223636-2		
13. SSS NO.	06-3396293-9	19. TELEPHONE NO.	
14. TIN NO.	319-493-120-000	20. MOBILE NO.	09477957062
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	reymartinreoma@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NAME EXTENSION (JR., SR)		
MIDDLE NAME			
OCCUPATION			
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME	REOMA		
FIRST NAME	BONIFACIO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	BAER		
25. MOTHER'S MAIDEN NAME			
SURNAME	LUMBRE		
FIRST NAME	VERONICA		
MIDDLE NAME	SALDUA		

(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	SOGOD CENTRAL SCHOOL	PRIMARY EDUCATION	1999	2005		2005	
SECONDARY	SAINT JOSEPH COLLEGE	SECONDARY EDUCATION	2005	2009		2009	
VOCATIONAL / TRADE COURSE							
COLLEGE	UNIVERSITY OF SANTO THOMAS	BACHELOR OF ARTS IN CLASSICAL STUDIES	2009	2013		2013	CUM LAUDE
GRADUATE STUDIES	UNIVERSITY OF SAN JOSE RECOLETOS	MASTER OF SCIENCE IN DEVELOPMENT COMMUNICATION	2015	2016	27 UNITS		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	June 24, 2019	CS FORM 212 (Revised 2017), Page 1 of 4
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[illegible]

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

[illegible]

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[illegible]

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

[illegible]

VIII. OTHER INFORMATION

[illegible]

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June 24, 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)?

☐ YES☒ NO

☐ YES☒ 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?

☐ YES☒ NO

☐ YES☒ NO

If YES, give details:

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?

☐ YES☒ 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?

☐ YES☒ 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?

☐ YES☒ NO

☐ YES☒ NO

If YES, give details:

If YES, give details:

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

☐ YES☒ 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?

☐ YES☒ NO

If YES, please specify:

☐ YES☒ NO

If YES, please specify ID No:


☐ YES☒ NO

If YES, please specify ID No:


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

NAME	ADDRESS	TEL. NO.
FR. HAROLD L. RENTORA, OSA	NATIONAL COMMISSION FOR CULTURE AND THE ARTS	9175068819
MS. JAYNE ABELLA	GRADUATE SCHOOL OF THE UNIVERSITY OF SAN JOSE DECOLETO	9178084815
MR. JOEL SAGUT	UNIVERSITY OF SANTO TOMAS	24061611

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




Right Thumbmark

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

Government Issued ID: **PASSPORT**

ID/License/Passport No.: **EC8676164**

Date/Place of Issuance: **DFA TACLOBAN**




Signature (Sign inside the box)

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this **17 JUL 2019**, affiant exhibiting his/her validly issued government ID as indicated above.



ATTY. RYSA C. GUINOCOR
VS LEGAL COUNSEL
Person Administering Oath

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