

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	POMIDA		
FIRST NAME	JAN JOSHUA		NAME EXTENSION (JR., SR)
MIDDLE NAME	MASAS		
3. DATE OF BIRTH (mm/dd/yyyy)	1/15/1996	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	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"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	H-1 Duplex House/Block/Lot No. Street VSU, Visca Pangasugan Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
7. HEIGHT (m)	1.64	ZIP CODE	6521-A
8. WEIGHT (kg)	72		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	H-1 Duplex House/Block/Lot No. Street VSU, Visca Pangasugan Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
10. GSIS ID NO.		ZIP CODE	6521-A
11. PAG-IBIG ID NO.			
12. PHILHEALTH NO.	1300-0124-7264		
13. SSS NO.		19. TELEPHONE NO.	(053) 563-7093
14. TIN NO.	345 451 314 0000	20. MOBILE NO.	09064673756
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	janjo.pomida@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)	None	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	POMIDA			
FIRST NAME	VIRGILIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	QUITON			
25 MOTHER'S MAIDEN NAME	ARGINA LIBATON MASAS			
SURNAME	POMIDA			
FIRST NAME	ARGINA			
MIDDLE NAME	MASAS		(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	Visca Foundation Elementary School	N/A	2002	2008		2008	Salutatorian
SECONDARY	Visayas State University Laboratory High School	N/A	2008	2012		2012	With High Honors
VOCATIONAL / TRADE COURSE	N/A	N/A					
COLLEGE	Visayas State University	Bachelor of Science in Civil Engineering	2012	2017		2017	Cum Laude
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE		CS FORM 212 (Revised 2017), Page 1 of 4
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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
	Board of Civil Engineering	93.55	Nov. 12, 2017	Cebu City, Cebu	0156212	01/15/2020
	Driver's Lisenec		Mar. 9, 2018	Baybay City, Leyte	H1218000939	01/15/2023

(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.

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE		CS FORM 212 (Revised 2017), Page 2 of 4
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[illegible]

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

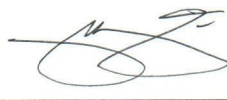

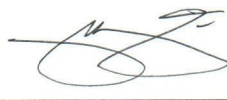

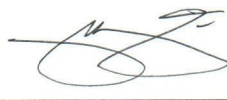

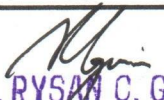
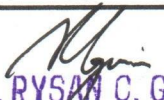
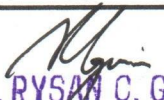
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
	From	To			
PRIME-HRM Seminar Orientation	08/29/2018	08/29/2018	9 hrs	Technical	ODAHRD - VSU

[illegible]

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC ACHIEVEMENTS (Write in full)	33. MEMBERSHIP IN PROFESSIONAL ORGANIZATION (Write in full)
Music		PICE - CEBU
Graphics		PICE - VSUSC

SIGNATURE		DATE		CS FORM 212 (Revised 2017), Page 3 of 4
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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)																	
<table><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>EPIFANIA G. LORETO</td><td>Visca, Baybay City, Leyte</td><td>9952167888</td></tr><tr><td>ROBERTO C. GUARTE</td><td>Visca, Baybay City, Leyte</td><td>9173208070</td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	EPIFANIA G. LORETO	Visca, Baybay City, Leyte	9952167888	ROBERTO C. GUARTE	Visca, Baybay City, Leyte	9173208070							
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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.																	
<table><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>H1218000939</td></tr><tr><td>Date/Place of Issuance:</td><td>04/09/2018/Baybay City</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.:	H1218000939	Date/Place of Issuance:	04/09/2018/Baybay City	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td> </td></tr><tr><td>Date Accomplished</td></tr></table> <table><tr><td></td></tr><tr><td>Right Thumbmark</td></tr></table>		Signature (Sign inside the box)		Date Accomplished		Right Thumbmark
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SUBSCRIBED AND SWORN to before me this DEC 20 2018 , affiant exhibiting his/her validly issued government ID as indicated above.																	
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