CS Form No.	21
Revised 2017	
2	

PERSONAL DATA SHEET

3			A OI	M Shake Shown	•				
	tion made in the Personal Data Sheet and the					iminal case/s aga	inst the perso	on concerned.	
	TO FILLING OUT THE PERSONAL DATA SHEET (and use separate sheet if necessary. Indicate N			PDS FORM	1. C\$ ID No.		(Do not fill up.	For CSC use only)	
I. PERSONAL INFORMATIO	DN -								
2. SURNAME	MUERTIGUE								
FIRST NAME	JESIBEL					NAME EXTENSION (JF	R., SR) N/A	A	
MIDDLE NAME	LUFRANGCO								
DATE OF BIRTH (mm/dd/yyyy)	10/3/1992	16. CITIZENSHIP		 ✓ Fill	pino	Dual Citizenship			
4. PLACE OF BIRTH	MAPGAP, BAYBAY CITY, LEYTE	If holder of dual citize	enship,			py birth Pls. indicate	by natural	lization	
5. SEX	Male Female	please indicate the o	details.	Philippi	nes		,	_	
6 CIVIL STATUS	Single	17. RESIDENTIAL ADDRESS				30 [DE DECIEMBRE S	ST.	
	Widowed Separated Other/s:	A CONTRACTOR OF THE SECOND SEC		use/Block/Lot ubdivision/Villa			Street ZONE 23		
7. HEIGHT (m)	1.49 m		В	AYBAY CIT	Υ		Barangay LEYTE		
8. WEIGHT (kg)	42 kg	ZIP CODE		City/Municipalit	<u>y</u>		Province		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS				30 0	DE DECIEMBRE S	ST.	
10. GSIS ID NO.	N/A			use/Block/Lot			ZONE 23		
11. PAG-IBIG ID NO.	1211-2604-8041	4,960,10,990,51,011		abdivision/Villa AYBAY CIT			Barangay LEYTE		
12. PHILHEALTH NO.	12-051363940-1	ZIP CODE		City/Municipalit 6521	ly		Province		
13. SSS NO.	06-3226809-0	Application of the complete of	N/A	0021					
14. TIN NO.	324766935-0000	19. TELEPHONE NO.	N/A						
15. AGENCY EMPLOYEE NO.	N/A	20. MOBILE NO.	09169108769 lufrangco79@gmail.com						
II. FAMILY BACKGROUND		21. E-MAIL ADDRESS (if any)	lutrangco	79@gma	all.com				
22. SPOUSE'S SURNAME	MUERTIGUE		23. NAME of CH	ILDREN (Writ	e full name and	list all)	DATE OF BIR	TH (mm/dd/yyyy)	
FIRST NAME	RODNEY	NAME EXTENSION (JR., SR)			N/A			(
MIDDLE NAME	ARIOSA	INA	190						
OCCUPATION	PHARMACIST								
EMPLOYER/BUSINESS NAME	WESTERN LEYTE PROVINCIAL HOSPITAL								
BUSINESS ADDRESS	PAN-PHILIPPINE HIGHWAY, BAYBAY CITY,	LEYTE							
TELEPHONE NO.	N/A								
24. FATHER'S SURNAME	LUFRANGCO								
FIRST NAME	PABLO	NAME EXTENSION (JR., SR) Sr.							
MIDDLE NAME	NIEPEZ								
25. MOTHER'S MAIDEN NAME									
SURNAME	GUTAS							and the second	
FIRST NAME	ELENA								
MIDDLE NAME	MANLA		(Continue on separate sheet if necessary)				sary)		
III. EDUCATIONAL BACKG	ROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGR (Write in full)	EE/COURSE	PERIOD OF	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	PAJO ELEMENTARY SCHOOL	PRIMARY EDUCATION		1999	2005	N/A	2005	N/A	
SECONDARY	BABAG NATIONAL HIGH SCHOOL	HIGH SCHOOL		2005	2009	N/A	2009	N/A	
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
COLLEGE	UNIVERSITY OF CEBU-LAPULAPU & MANDAUE	BS NURSING	2009 2011 & 103 N/A		N/A	N/A			
	UINIVERSITY OF THE PHILIPPINES-OPEN UNIVERSITY, LOS BAÑOS, LAGUNA	BS EDUCATION STUDIES		2021	present	N/A	N/A	N/A	
GRADUATE STUDIES	N/A	N/A	1	N/A	N/A	N/A	N/A	N/A	
THE REPORT OF THE STREET		Continue on separate sheet if nec	essary)				our states in the rest		
SIGNATURE	Water,			D.	ATE	4/16/	2621		

	RVICE ELIC	1080 (BOARD/ BAR) UNDER		DATE OF				LICENSE (if	applicable)
	SPECIAL LA	WS/ CES/ CSEE LITY / DRIVER'S LICENSE	RATING (If Applicable)	EXAMINATION / CONFERMENT	AMINATION / PLACE OF EXAMINATION / CONFERMENT		MENT	NUMBER	Date of Validity
CAREER	R SERVICE - S	SUBPROFFESIONAL	80.63%	8/4/2019	Tacloban City			760875	10/3/201
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WORK F	XPERIENCE		(1	Continue on separate sheet i	f necessary)				
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From	То	(Write in full/Do not	abbreviate)		o not abbreviate)	SALARY	(Format "00-0")/	APPOINTMENT	(Y/ N)
2/13/2018	present	CLERK		COLLEGE OF FORESTRY AND ENVIRONMENTAL SCIENCE & DEPARTMENT OF FOREST SCIENCE		553.40 DAILY	N/A	JOB ORDER	YES
1/16/2015	4/15/2016	CASHIER		VICSAL DEVELOPME CASHIERING DEPAR		10,478/mon th 8,840/mont	N/A	CONTRACTUAL	NO
/10/2014	4/10/2015	CASHIER		GRAND GROUP OF		h	N/A	CONTRACTUAL	NO
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		hief/Executive/Mana	gerial positions)	
GRAMS ATTE	ATTENDANCE		Type of LD (Managerial/	CONDUCTED/ SPONSORED BY
150,000,000	n comment	25 m 25 m	Supervisory/ Technical/etc)	(Write in full)
QUITY AND 3/1/2021	3/1/2021	4	TECHINICAL	CCARPH-NRC
			5 TOAL	
				OFFICE OF THE PRESIDENT OFFICE OF THE VICE PRESIDENT OF
		16hrs		ACADEMIC AFFAIRS, VSU OFFICE OF HUMAN RESOURCE
12/13/2019	12/13/2019	8hrs.	1 72	MANAGEMENT, VSU
12/18/2019	12/19/2019	16hrs	19:37:31 n	OFFICE OF HUMAN RESOURCE MANAGEMENT, VSU
11/26/2019	11/26/2019	4hrs		OFFICE OF HUMAN RESOURCE MANAGEMENT, VSU
E IN VSU 01/14/2019	01/14/2019	8hrs.		OFFICE OF HUMAN RESOURCE
09/06/2018	09/06/2018			MANAGEMENT, VSU OFFICE OF HUMAN RESOURCE
03/03/2010	03/00/2010	Oils.	11 To 1 To 1	MANAGEMENT, VSU
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		GNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATI
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Political Service	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree?		YES	*			
	b. within the fourth degree (for Local Government Unit - Can	YES J					
35.	a. Have you ever been found guilty of any administrative offe	ense?	YES INO If YES, give details:				
	b. Have you been criminally charged before any court?	YES NO If YES, give details: Date Filed: Status of Case/s:					
36.	Have you ever been convicted of any crime or violation of an any court or tribunal?	ny law, decree, ordinance or regulation by	YES VES NO If YES, give details:				
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, er (abolition) in the public or private sector?		YES If YES, give details:	O NO			
38.	a. Have you ever been a candidate in a national or local ele Barangay election)? b. Have you resigned from the government service during the service during	☐ YES					
Santo	election to promote/actively campaign for a national or local		If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):					
40. a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) May 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972). Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐ YES					
			If YES, please specify ID	No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)					
	NAME	ADDRESS	TEL. NO.				
	DENNIS P. PEQUE	CFES, VSU, BAYBAY CITY, LEYTE	563-7552				
_	ANGELICA P. BALDOS	DFS, VSU, BAYBAY CITY, LEYTE	563-7552				
	EDUARDO O. MANGAOANG	RCCRDC, VSU, BAYBAY CITY, LEYTE	563-7616				
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this docu administrative/criminal case/s against me.	ent laws, rules and regulations of the lentative to verify/validate the contents state	Republic of the definition of the left defini	JESIBEL L. MUERTIGUE			
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance						
Go	overnment Issued ID: Phil health ID	Milyon					
ID/	License/Passport No.: 12-051 かんカタリロー1	ox)					
Da	te/Place of Issuance: \(\frac{1}{2}\right/\frac{1}{2}\)	1	Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this	MAY 2021 , affiant exhibiting	g his/her validly issued gove	ernment ID as indicated above.			
		Person Administering Oath		A STANCES			