

## 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 ( ) ☐ 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	JAGONOS		
FIRST NAME	LIZA ANN	NAME EXTENSION (JR., SR)	
MIDDLE NAME	CORONADO		
3. DATE OF BIRTH (mm/dd/yyyy)	23/12/1985	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	METRO MANILA	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	140 House/Block/Lot No. Street COGON Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.524	ZIP CODE	6521
8. WEIGHT (kg)	80	18. PERMANENT ADDRESS	140 House/Block/Lot No. Street COGON Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
9. BLOOD TYPE	O+	ZIP CODE	6521
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	
11. PAG-IBIG ID NO.	1212 0143 4086	20. MOBILE NO.	09665601421 / 09631930694
12. PHILHEALTH NO.	13-025202926-6	21. E-MAIL ADDRESS (if any)	<a href="mailto:liza.jagonos@vsu.edu.ph">liza.jagonos@vsu.edu.ph</a>
13. SSS NO.	N/A		
14. TIN NO.	466-626-414-000		
15. AGENCY EMPLOYEE NO.	N/A		

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	JAGONOS		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	JIMMY	NAME EXTENSION (JR., SR)	ELIZ JIMELLI C. JAGONOS	05/01/2015
MIDDLE NAME	PANOGAN		ERIN JIANNNA C. JAGONOS	04/12/2020
OCCUPATION	DRIVER			
EMPLOYER/BUSINESS NAME	ATI-RTC 8			
BUSINESS ADDRESS	VISCA, BAYBAY CITY, LEYTE			
TELEPHONE NO.				
24. FATHER'S SURNAME	CORONADO			
FIRST NAME	FELIX	NAME EXTENSION (JR., SR)		
MIDDLE NAME	AVELINO	JR.		
25. MOTHER'S MAIDEN NAME				
SURNAME	FERNANDEZ			
FIRST NAME	ELIZABETH			
MIDDLE NAME	URDANETA			
(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	FORT BONIFACIO ELEMENTARY SCHOOL		1992	1998		1998	N/A
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL		1998	2002		2002	N/A
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	FRANCISCAN COLLEGE OF IMMACULATE CONCEPTION	ASSOCIATE IN COMPUTER TECHNOLOGY	2003	2005			
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE

DATE


7/24/2021



[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	7/27/2021
-----------	---	------	-----------



[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)
--------------------------------	--	---










COMPUTER/TYPING SKILLS	N/A	N/A
DRIVING (MOTORCYCLE)		
COOKING		

SIGNATURE		DATE	7/27/2021
-----------	---	------	-----------



7/27/2021



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>ALICIA M. FLORES</td><td>BRGY. GUADALUPE, BAYBAY CITY</td><td></td></tr><tr><td>ATTY. EDEN C. BUTAWAN</td><td>BRGY. COGON, BAYBAY CITY</td><td></td></tr><tr><td>TERESITA S. PIALAGO</td><td>BRGY. COGON, BAYBAY CITY</td><td></td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	ALICIA M. FLORES	BRGY. GUADALUPE, BAYBAY CITY		ATTY. EDEN C. BUTAWAN	BRGY. COGON, BAYBAY CITY		TERESITA S. PIALAGO	BRGY. COGON, BAYBAY CITY					
NAME	ADDRESS	TEL. NO.															
ALICIA M. FLORES	BRGY. GUADALUPE, BAYBAY CITY																
ATTY. EDEN C. BUTAWAN	BRGY. COGON, BAYBAY CITY																
TERESITA S. PIALAGO	BRGY. COGON, BAYBAY CITY																
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.) PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID:</td><td>PhilHealth ID</td></tr><tr><td>ID/License/Passport No.:</td><td>13-025202926-6</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:	PhilHealth ID	ID/License/Passport No.:	13-025202926-6	Date/Place of Issuance:	Baybay City, Leyte	<table><tr><td colspan="2"></td></tr><tr><td colspan="2">Signature (Sign inside the box)</td></tr><tr><td colspan="2">7/27/2021</td></tr><tr><td colspan="2">Date Accomplished</td></tr></table>			Signature (Sign inside the box)		7/27/2021		Date Accomplished	
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance																	
Government Issued ID:	PhilHealth ID																
ID/License/Passport No.:	13-025202926-6																
Date/Place of Issuance:	Baybay City, Leyte																
																	
Signature (Sign inside the box)																	
7/27/2021																	
Date Accomplished																	
<table><tr><td></td></tr><tr><td>Right Thumbmark</td></tr></table>			Right Thumbmark														
																	
Right Thumbmark																	
SUBSCRIBED AND SWORN to before me this <u>17 AUG 2021</u> , affiant exhibiting his/her validly issued government ID as indicated above.																	
<table><tr><td colspan="2"></td></tr><tr><td colspan="2">ATTY. RYSKA C. GUINOCOR YSU Legal Officer</td></tr><tr><td colspan="2">Person Administering Oath</td></tr></table>				ATTY. RYSKA C. GUINOCOR YSU Legal Officer		Person Administering Oath											
																	
ATTY. RYSKA C. GUINOCOR YSU Legal Officer																	
Person Administering Oath																	