

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	MONTAJES		
FIRST NAME	CARLOS	NAME EXTENSION (JR., SR) None	
MIDDLE NAME	BAGARINAO		
3. DATE OF BIRTH (mm/dd/yyyy)	05/01/1967	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: Philippines
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 type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.6	ZIP CODE	6521-A
8. WEIGHT (kg)	67		
9. BLOOD TYPE	B	18. PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
10. GSIS ID NO.	CM 3876126	ZIP CODE	6521-A
11. PAG-IBIG ID NO.	080124812904		
12. PHILHEALTH NO.	13-0000 15751-8	19. TELEPHONE NO.	N/A
13. SSS NO.	N/A	20. MOBILE NO.	09359246399
14. TIN NO.	140-031-667	21. E-MAIL ADDRESS (if any)	N/A
15. AGENCY EMPLOYEE NO.	00-669		

II. FAMILY BACKGROUND

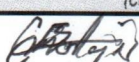
22. SPOUSE'S SURNAME	MONTAJES		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	MIRASOL	NAME EXTENSION (JR., SR) None	MONTAJES, MIRALUZ BULPA	12/13/1995
MIDDLE NAME	BULPA		MONTAJES, MARLOU BULPA	02/02/1997
OCCUPATION	HOUSEWIFE		MONTAJES, MICA ROSE BULPA	03/19/2001
EMPLOYER/BUSINESS NAME	N/A		MONTAJES, MARIEL BULPA	04/29/2006
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	MONTAJES			
FIRST NAME	ISMAEL	NAME EXTENSION (JR., SR) SR.		
MIDDLE NAME	ABALORA			
25. MOTHER'S MAIDEN NAME	BAGARINAO, REGINA SACLAPUS			
SURNAME	BAGARINAO			
FIRST NAME	REGINA			
MIDDLE NAME	SACLAPUS			

(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	SAN AGUSTIN ELEMENTARY SCHOOL	Elementary Graduate	1975	1981	N/A	1981	N/A
SECONDARY	BUNGA NATIONAL HIGH SCHOOL	2nd Year High School	1981	1984	2nd Year	1984	N/A
VOCATIONAL / TRADE COURSE							
COLLEGE							
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	04/24/17
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[illegible]

(Continue on separate sheet if necessary)

(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)

6/13/21

04/24/17

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION

[illegible]

(Continue on separate sheet if necessary)

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]

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	04/24/17
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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)?

35. a. Have you ever been found guilty of any administrative offense?

b. Have you been criminally charged before any court?

36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?

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?

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?

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

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
DR. OSCAR B. POSAS	BRGY. MARCOS BAYBAY CITY LEYTE	0917 987 3062
DR. GREGORIO J. GALINATO JR.	BRGY. GUADALUPE BAYBAY CITY 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.

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)

PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: COMMUNITY TAX CERTIFICATE

ID/License/Passport No.: 1119361

Date/Place of Issuance: 02/09/2017, BAYBAY CITY LEYTE

Signature (Sign inside the box)

04/24/17

Date Accomplished



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

ATTY. RYSA C. GUINOCOR

NOTARY PUBLIC

Person Administering Oath