

# 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	FUENTES		
FIRST NAME	NOVA FARRA	NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	ADARNA		
3. DATE OF BIRTH (mm/dd/yyyy)	09/14/1991	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	CEBU CITY	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 checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	822 MAGSAYSAY House/Block/Lot No. Street PASIL Subdivision/Village Barangay CEBU CEBU City/Municipality Province ZIP CODE 6000
7. HEIGHT (m)	1.57 m	18. PERMANENT ADDRESS	822 MAGSAYSAY House/Block/Lot No. Street PASIL Subdivision/Village Barangay CEBU CEBU City/Municipality Province ZIP CODE 6000
021 WEIGHT (kg)	75 kg		
9. BLOOD TYPE	A+	19. TELEPHONE NO.	N/A
10. GSIS ID NO.	021-1695-6161-2	20. MOBILE NO.	09217931641
11. PAG-IBIG ID NO.	121137863451	21. E-MAIL ADDRESS (if any)	<a href="mailto:Obang13@gmail.com">Obang13@gmail.com</a>
12. PHILHEALTH NO.	12-000115663-8		
13. SSS NO.	0636404685		
14. TIN NO.	311502587		
15. AGENCY EMPLOYEE NO.	10283		

## 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) N/A	MATT JOAQUIN CUYNO	02/12/2018
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	FUENTES			
FIRST NAME	WENDELL	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	DEGRACIA			
25. MOTHER'S MAIDEN NAME	LABAJO			
SURNAME	FUENTES			
FIRST NAME	EMPERATRIZ			
MIDDLE NAME	ADARNA		(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	PASIL ELEMENTARY SCHOOL	ELEMENTARY	1997	2004	GRADUATED	2004	N/A
SECONDARY	DON CARLOS A. GOTHONG MEMORIAL NATIONAL HIGH SCHOOL	HIGH SCHOOL	2004	2008	GRADUATED	2008	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	UNIVERSITY OF CEBU-BANILAD CAMPUS	BACHELOR OF SCIENCE IN NURSING	2008	2012	GRADUATED	2012	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	January 1, 2023
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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)		
NAME	ADDRESS	TEL. NO.
MICHELLE VILLAESTER	INAYAWAN, CEBU CITY	9666154074
SANTOS M. CABANLIT	RABAYA, TALISAY CITY, CEBU	9294704007
MABEL CUYNO	COGON PARDO, CEBU CITY	9238213858



PHOTO

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: <b>PAGIBIG</b>
ID/License/Passport No.: <b>121137863451</b>
Date/Place of Issuance: <b>AUGUST 23, 2019/CEBU CITY</b>

Signature (Sign inside the box)
<b>JULY 11, 2023</b>
Date Accomplished

Right Thumbmark

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

Person Administering Oath