Revised 2017	PERS	ONAL D	ΔΤΔ	SHE	FT			
	entation made in the Personal Data	Sheet and the Work Exper	ience Sheet	shall cause the	e filing of ac	lministrative/c	criminal case	s against the
Print legibly. Tick appropriate bo	oxes (1) and use separate sheet if nec	essary. Indicate N/A if not app	FORE ACC	OMPLISHING TO OT ABBREVIAT	HE PDS FOR	RM.	(Do not fill us	o. For CSC use o
2. SURNAME						NO.	(Do not niir ut	b. For USC use o
	FERNANDEZ						A STATE OF THE STA	
FIRST NAME	REYMOND					NAME EXTER	NSION (JR., SR)	
MIDDLE NAME	ALTEJAR							
3. DATE OF BIRTH (mm/dd/yyyy)	10/30/1990	16. CITIZENSHIP  If holder of dual citizenship,		X Filipino	)	Dual Citiz	enship	
4. PLACE OF BIRTH	BAYOMBONG NUEVA VIZCAYA			■ State Stat				
5. SEX	X Male Female	please indicate the o	details					
6 CIVIL STATUS	X Single Married Widowed Separated Other/s:	17. RESIDENTIAL ADDRESS		N/A House/Block/Lot No. N/A			POBLACION 6 Street LINAPACAN	
7. HEIGHT (m)	1.62	Pirku oblini a smili	-	Subdivision/Villa CORON			Barangay	
8. WEIGHT (kg)	165.34	7/0 0005		City/Municipalit			PALAWA Province	N
BLOOD TYPE	100.04	ZIP CODE  18. PERMANENT ADDRESS		5316 N/A	NEW ST	SHOW	Tringing	SE DESEXTED
00/0/0	A			House/Block/Lot	Vo.	25001	N/A Street	rescuence
). GSIS ID NO.	2005370940	Control Management of the Control of		N/A Subdivision/Villa	IZMANYE:	SAI	NTO DOM	NGO
. PAG-IBIG ID NO.	9162-9334-4232	The state of the s		BAMBANG	3	NU	Barangay JEVA VIZO	AYA
PHILHEALTH NO.	06-025299564-4	ZIP CODE		City/Municipality 3702	1		Province	BIOSTINIAN
. SSS NO.	01-234222358	19. TELEPHONE NO.		N/A	P. HALLES	umann I	EUCKENE	De Orac code
TIN NO.	457-250-278-000	20. MOBILE NO.		7120581				
AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)		dezreymon	1281@va	haa aam	ah	HCGB-HTS-ST-LL
FAMILY BACKGROUN	D		Tiornani	dezreymon	1201Wy2	inoo.com.p	311	Elijo Deo.
SPOUSE'S SURNAME	N/A		23. NAME of	CHILDREN (Write	full name and li	st all)	DATE OF BIR	TH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A					
MIDDLE NAME	N/A							
OCCUPATION	N/A							
EMPLOYER/BUSINESS NAME	N/A							
BUSINESS ADDRESS	N/A							
TELEPHONE NO.	N/A							
FATHER'S SURNAME	FERNANDEZ							
FIRST NAME	ANDRES	NAME EXTENSION (JR., SR)						-
MIDDLE NAME	DOMINCEL				-			
MOTHER'S MAIDEN NAME	ALTEJAR							
SURNAME	FERNANDEZ							
FIRST NAME	CRISTETA							
MIDDLE NAME	LABASA			(Conti		do obood if accoun		
EDUCATIONAL BACKO	1001 17 (200 17 400 17			Conti	nue on separa	te sheet if neces	sary)	
LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE (Write in full)	COURSE	PERIOD OF AT	TENDANCE	LEVEL/ UNITS EARNED	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	SANTO DOMINGO ELEMENTARY SCHOOL	ELEMENTARY		1998	2003	(if not GRADUATED	2003	9TH PLACE
SECONDARY	NUEVA VIZCAYA GENERAL COMPREHENSIVE HIGH SCHOOL	HIGH SCHOO		2003	2003	GRADUATED		MOST
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A		2007	WORTHY
COLLEGE	NUEVA VIZCAYA STATE	BACHELOR OF SCIE	NCE IN		2013	N/A	N/A	SINGAPOREA
COLLEGE			The state of the s					
GRADUATE STUDIES	UNIVERSITY N/A	FORESTRY N/A		2009 N/A	N/A	GRADUATED N/A	2013 N/A	SCHOLAR N/A

7. CAREFF	R SERVICE/RA 10		PATRIC	DATE OF				LICENSE (if ap	plicable)
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE  (If Applicable)			EXAMINATION / CONFERMENT	ON / CONFERMENT		NUMBER	Date of Validity		
FORESTER LICENSURE EXAMINATION 75%		75%	08/2-3/2015	GE DIMAS MANILA	SALANG,	0010522	ent sines Opel So		
						HON	391		
						HAUS	13/4		MAR.
	gytaresia	roleg [] e	en (X)			000 NO	502	in.	resime.
TE SHELLINE		or 24	Conti	nue on separate sheet if n	onecean)	MOSM	SAYC		lis ne
	XPERIENCE								
	SIVE DATES	ent. Start from your rec			2 learness 2	MONTHLY	SALARY/ JOB/ PAY GRADE (if		GOVT
(mn	n/dd/yyyy) To	POSITION T (Write in full/Do not		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)			applicable) & STEP (Format *00-0*)/ INCREMENT	STATUS OF APPOINTMENT	SERVICI (Y/N)
1/23/2018	PRESENT	FOREST TECHNICIA	N1	(MIMAROPA REGION) CO	MENT AND NATURAL RESOURCES MMUNITY ENVIRONMENT AND S OFFICE CORON, PALAWAN	P14,830.00	06-1	PERMANENT	Υ
9/16/2017	12/23/2017	FOREST EXTENSION	OFFICER	DEPARTMENT OF ENVIRONI (MIMAROPA REGION) COMM NATURAL RESOURCES OFF	MENT AND NATURAL RESOURCES UNITY AND ENVIRONMENT AND CE OCCIDENTAL MINDORO	P18,450.00	N/A	CONTRACTUAL	Υ
4/17/2017	06/30/2017	FOREST EXTENSION	OFFICER	PROVINCIAL ENVIRONME SUB-OFFICE BAYO	MENT AND NATURAL RESOURCES NT AND NATURAL RESOURCES MBONG, NUEVA VIZCAYA	P15,000.00	N/A	CONTRACTUAL	Υ
2/10/2017	03/20/2017	PRIVATE SURVEYO		INTEGRATED A	GANIZATION SUSTAINABLE REA DEVELOPMENT	P18,000.00	N/A	CONTRACTUAL	Y
	12/31/2016	SPECIALIS		ENVIRONMENT AND MATURAL RESOURCES OFFICE BAYOMBONG NUEVA VIZGAYA		710,000.00	N/A	CONTRACTUAL	
6/01/2016	10/17/2016	CONTRACTUAL FOR		DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES OFFICE SCIENCE CITY OF MUNOZ, NUEVA ECIJA  DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES		P18,450.00	N/A	CONTRACTUAL	Y
1/21/2014	12/31/2015	FOREST EXTENSION		OFFICE TARLAC CITY, TARLAC  DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES			N/A	CONTRACTUAL	Y
6/21/2013	12/01/2013	FOREST EXTENSION	ON OFFICER	COMMUNITY ENVIRONM OFFICE B	ENT AND NATURAL RESOURCES ALIUAG, BULACAN	P7,751.00	N/A	CONTRACTUAL	Y
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	AWA			ASIA BELON SO SOUTH	DEEL TRANSPORT	SI COUNTY			
			(Fam.	tinue on separate sheet if	paraecany	I SALES			
	ATURE	10 1	7	unde on separate sneet If	DATE				

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)			LE / VOLUNTARY ORGANIZATION/S			
	(Wild install)	From	To	NUMBER OF HOURS		POSITION / NATURE OF WORK		
N/A	79 TEST	N/A	N/A	N/A	N/A	V6 1400		
	Dat (S)							
	W C				D II CHE CHIRIT	A STATE AND CONTRACT THE PARTY OF CHES		
	200 E	39/1			- Charles			
II I EAR	RNING AND DEVELOPMENT (L&D)	(Con	tinue on separate	sheet if necessary)				
Start from th	e most recent L&D/training program and includ	le only the releva		ING PROGRAM ken for the last five (	<b>1S ATTENDED</b> (5) years for Division			
30	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	ATTE	ENDANCE (dd/xxxx)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
	TION OF THE NEW ENTRANTS	04/03/2018	04/04/2018	36	TECHNICAL	DEPARTMENT OF ENVIRONMENT AND NATURA RESOURCES REGIONAL OFFICE		
OR ENHAN	EVENT ON COMMUNITY ORGANIZING ICED NATIONAL GREENING PROGRAM	05/10/2017	05/12/2017	27	TECHNICAL	DEPARTMENT OF ENVIRONMENT AND NATURA RESOURCES REGION II TUGUEGARAO CUTY		
EVELOPM	EVENT ON AGROFORESTRY FARM ENT AND ORGANIZATION MANAGEMENT	05/15/2017	05/17/2017	27	TECHNICAL	DEPARTMENT OF ENVIRONMENT AND NATURA RESOURCES PROVINCIAL ENVIRONMENT AND		
ND WORKS	MANAGEMENT PROJECT LEVELING-OFF SHOP MANAGEMENT	06/17/2016	06/17/2016	9	TECHNICAL	DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES PROVINCIAL ENVIRONMENT AND		
TILIZATION (	THE TECHNOLOGY APPLICATION AND OF MYCHORRHIZAL FUNGI FOR NURSERY AND MANAGEMENT	06/04/2014	06/10/2014	8	TECHNICAL	NATURAL RESOURCES TARLAC CITY TARLAC DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCESONSTEEM RESEARCH AND DEVELOPMENT SERVICE REGION III SAN FERNANDO CITY, PAMPANGA		
	112							
			Constitution of	la interes	M 10 11 11 6 74	Washers and the organ		
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		1000		territine		есило в слизе		
		PER BUT IN	SCOVENIENT TO	NEGROOD		COBIONARY		
II. OTHE	ER INFORMATION	(Cont	nue on separate s	heet if necessary)				
31.	SPECIAL SKILLS and HOBBIES	NON		NCTIONS / RECOGN te in full)	IITION	MEMBERSHIP IN  33. ASSOCIATION/ORGANIZATION (Write in full)		
COMPUT	TER LITERATE,		N/A	N/A				
FOREST	SURVEYING	N/A				N/A		
OMMUNITY ORGANIZING N/A				N/A				
COMMUN	NITY PROFILING	N/A				N/A		
COOKING	C The second of		N/A			N/A		
ECORD H	KEEPING AND RECORD FILING		N/A	fee mells		N/A		
	CICNATURE	(Conti	nue on separate s	The second second				
	SIGNATURE	Kd	en	DA	TE			

34. Are you related by consanguinity or affinity to the appropriate of bureau or office or to the person of the pe	ointing and				
chief of bureau or office or to the person who has imm	or recommending authority, or	to			
Bureau or Department where you will be apppointed,	lediate supervision over you in the				
a. within the third degree?		100/00/00 or expositions			
b. within the fourth degree (for Local Government Unit	0 5 .	YES NO			
and the Foods Covertiment Out	- Career Employees)?	YES NO			
		If YES, give details:			
35 a Have you ever book found with t					
35, a. Have you ever been found guilty of any administrative	/e offense?	☐ YES			
		If YES, give details:			
b. Have you been criminally charged before any court?					
o a state day count,		YES NO			
		If YES, give details:  Date Filed:			
		Status of Case/s:			
66. Have you ever been convicted of any crime or violation	of any law decree ordinance or	Oldido di Gasers.			
regulation by any court or tribunal?	any rang accrecy ordinance of	YES NO			
		If YES, give details:			
7. House you show he was a second					
37. Have you ever been separated from the service in any or retirement, dropped from the rolls, disprised termination	of the following modes: resignation,	☐ YES ☑ NO			
retirement, dropped from the rolls, dismissal, termination phased out (abolition) in the public or private sector?	If YES, give details:				
A. Have you ever been a candidate in a national or local	plantian hald within the state	AND THE STATE OF THE BOTTOM SEED OF THE STATE OF THE STAT			
(except Barangay election)?	election field within the last year	☐ YES ☑ NO			
		If YES, give details:			
b. Have you resigned from the government service during	ng the three (3)-month period before	YES NO			
the last election to promote/actively campaign for a nation		If YES, give details:			
<ul> <li>Have you acquired the status of an immigrant or permar</li> </ul>	nent resident of another country?	☐ YES ☑ NO			
		If YES, give details (country):			
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	A 8972), please answer the following				
Are you a member of any indigenous group?					
		☐ YES ☐ NO If YES, please specify:			
Are you a person with disability?		☐ YES ☑ NO			
		If YES, please specify ID No:			
Are you a solo parent?		☐ YES			
		If YES, please specify ID No:			
REFERENCES (Person not related by consanguinity or affinity to applic	carlt /appointee)				
NAME	ADDRESS	TEL. NO.			
	MIMAROPA CALAPAN CITY				
ARGIE OCHOA	ORIENTAL MINDORO	09558309505			
RIBERTO B. SAÑOS	PUERTO PRINCESA CITY, PALAWAN	09054225558			
PE EDANGICO					
BE FRANCISCO	OCCIDENTAL MINDORO	09178939411			
I declare under oath that I have personally accomplished	this Personal Data Sheet which is a t	true, correct and			
complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized re	ent laws, rules and regulations of the	Republic of the			
herein. I agree that any misrepresentation made i	n this document and its attachments	shall cause the			
filing of administrative/criminal case/s against me.	A STATE OF THE STA	orian datas tris			
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Covernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance					
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overnment Issued ID: PRC					
0/License/Passport No.: 0010522	ne box)				
ate/Place of Issuance: 08/11/2015 PRC MANILA	Signature (Sign inside the	ANLTWO SERVICES			
TO THE THE THE TENT	Date Accomplishe	d Right Thumbmark			
SCRIBED AND SWORN to before me this	AE-1-1919	NO. 10 100 100 100 100 100 100 100 100 100			
	, amant exhibiting his/her validly is	ssued government ID as indicated above.			
	FRANKI IN G HER	NANDEZ			
	FRANKLIN G. HER Chief Administrative Office	r/Management			
The state of the s	Services Division Person Administering C	) oth			