

**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	CASUNDO		
FIRST NAME	GERALD	NAME EXTENSION (JR., SR)	
MIDDLE NAME	CATIBO		
3. DATE OF BIRTH (mm/dd/yyyy)	08-06-2000	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	INOPACAN, 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 checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:		
7. HEIGHT (m)	184	17. RESIDENTIAL ADDRESS	<b>394</b> <b>PUROK 3</b> <i>House/Block/Lot No. Street</i>
8. WEIGHT (kg)	160 kg		<b>BADIANG</b> <b>BUNGA</b> <i>Subdivision/Village Barangay</i>
9. BLOOD TYPE			<b>BAYBAY</b> <b>LEYTE</b> <i>City/Municipality Province</i>
10. GSIS ID NO.			<b>6521-A</b>
11. PAG-IBIG ID NO.	121306535644		
12. PHILHEALTH NO.	08-255023402-1	18. PERMANENT ADDRESS	<b>394</b> <b>PUROK 3</b> <i>House/Block/Lot No. Street</i>
13. SSS NO.			<b>BADIANG</b> <b>BUNGA</b> <i>Subdivision/Village Barangay</i>
14. TIN NO.	626-783-751		<b>BAYBAY</b> <b>LEYTE</b> <i>City/Municipality Province</i>
15. AGENCY EMPLOYEE NO.		19. TELEPHONE NO.	<b>6521-A</b>
		20. MOBILE NO.	+63936 063 5540
		21. E-MAIL ADDRESS (if any)	geraldcasundo01@gmail.com

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	
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	CASUNDO			
FIRST NAME	ANECETO JR.	NAME EXTENSION (JR., SR)		
MIDDLE NAME	TORENUEVA			
25. MOTHER'S MAIDEN NAME	ELVIRA TUDAS CATIBO			
SURNAME	CASUNDO			
FIRST NAME	ELVIRA			
MIDDLE NAME	CATIBO		(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)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	INOPACAN ELEMENTARY SCHOOL	BASIC EDUCATION	2006	2012	GRADE 6	2012	WITH HONORS
SECONDARY	BUNGA NATIONAL HIGHSCHOOL	BASIC EDUCATION	2012	2016	GRADE 10	2016	NONE
VOCATIONAL / TRADE COURSE	VISAYAS STATE UNIVERSITY-SHS	TVL-CROP AND ANIMAL PRODUCTION	2017	2018	GRADE 12	2018	NONE
COLLEGE	VISAYAS STATE UNIVERSITY-MAIN	BACHELOR OF SCIENCE IN AGRICULTURE	2018	2022	4RT YEAR	2022	TES & COLLEGE SCHOLARSHIP
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	July 21, 2023
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		

(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)

30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	READING, COOKING, AND DANCING			College of Agriculture and Food Sciences USSCF
				Plant Protection Major Association PPMA-President

(Continue on separate sheet if necessary)

SIGNATURE		DATE	July 21, 2023
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34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person who has immediate supervision over you in the Bureau or Department where you will be appointed,

a. within the third degree?

b. within the fourth degree (for Local Government Unit - Career Employees)?

☐ YES

☒ NO

☐ YES

☒ 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?

☐ YES

☒ NO

If YES, give details:

☐ YES

☒ 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?

☐ YES

☒ 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?

☐ YES

☒ 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?

☐ YES

☒ NO

If YES, give details:

☐ YES

☒ NO

If YES, give details:

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

☐ YES

☒ 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

a. Are you a member of any indigenous group?

b. Are you a person with disability?

c. Are you a solo parent?

☐ YES

☒ NO

If YES, please specify:

☐ YES

☒ NO

If YES, please specify ID No:

☐ YES

☒ NO

If YES, please specify ID No:

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
ROBELYN T. PIAMONTE	COGON, BAYBAY CITY	
NICOLASA N. FLORENTINO	GUADALUPE, BAYBAY CITY	+639161452957

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 08-255023402-1

ID/License/Passport No.:

Date/Place of Issuance:

Signature (Sign inside the box)

July 21, 2023

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

