

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	CANEZO		
FIRST NAME	XAVIERY RIC		NAME EXTENSION (JR., SR)
MIDDLE NAME	GALLOS		
3. DATE OF BIRTH (mm/dd/yyyy)	JANUARY 14, 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	ORMOC DISTRICT HOSPITAL	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:	17. RESIDENTIAL ADDRESS	52-1 PUKOK TOSA House/Block/Lot No. Street N/A TINAG-AN Subdivision/Village Barangay ALBUERA LEYTE City/Municipality Province
7. HEIGHT (m)	1.69	ZIP CODE	
8. WEIGHT (kg)	55	18. PERMANENT ADDRESS	52-1 PUKOK TOSA House/Block/Lot No. Street N/A TINAG-AN Subdivision/Village Barangay ALBUERA LEYTE City/Municipality Province
9. BLOOD TYPE	O	ZIP CODE	6342
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	0966 163 4424 (GLOBE) 0990 624 6931 (TNT)
11. PAG-BIG ID NO.	N/A	20. MOBILE NO.	
12. PHILHEALTH NO.	13-233399957-7	21. E-MAIL ADDRESS (if any)	canezojoe97@gmail.com
13. SSS NO.	N/A		
14. TIN NO.	N/A		
15. AGENCY EMPLOYEE NO.	N/A		

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	N/A	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	CANEZO		
FIRST NAME	RICARDO		
MIDDLE NAME	MIDERA		
25. MOTHER'S MAIDEN NAME			
SURNAME	GALLOS		
FIRST NAME	ARMIDA		
MIDDLE NAME	DELA CRUZ		

(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	TINAG-AN ELEMENTARY SCHOOL	N/A	2006	2012	N/A	2012	N/A
SECONDARY	PANULAM NATIONAL HIGH SCHOOL	N/A	2012	2018	N/A	2018	LEARNER'S AWARD
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY MAIN CAMPUS	BACHELOR OF SECONDARY EDUCATION	2018	2022	174	2022	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A		N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	9-19-2022
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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		
	VISAYAS STATE UNIVERSITY INTERACT SOCIETY			N/A	PUBLIC INFORMATION OFFICER

(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)

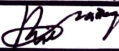
30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	INSTRUCTIONAL RESOURCES IN REMOTE LEARNING	11-19-21	11-19-21	7 hours	FOUNDATIONAL	COLLEGE OF EDUCATION
	ASSESSMENT STRATEGIES IN FLEXIBLE LEARNING	10-14-21	10-14-21	7 hours	FOUNDATIONAL	COLLEGE OF EDUCATION
	TEACHING IN THE NEW NORMAL	9-24-21	9-24-21	7 hours	FOUNDATIONAL	COLLEGE OF EDUCATION










(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)
	LISTENING TO MUSIC	N/A		VISAYAS STATE UNIVERSITY INTERACT SOCIETY
	WATCHING DOCUMENTARY SHOWS	N/A		
	TRAVEL	N/A		
	READING FINANCIAL BOOKS	N/A		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	9-17-2022
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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)?	<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 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 border="1"><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>KHAREN C. GERARDO</td><td>CARIBBO NATIONAL HIGH SCHOOL</td><td>N/A</td></tr><tr><td>JAY C. BANSAL</td><td>VISAYAS STATE UNIVERSITY MAIN CAMPUS</td><td>N/A</td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	KHAREN C. GERARDO	CARIBBO NATIONAL HIGH SCHOOL	N/A	JAY C. BANSAL	VISAYAS STATE UNIVERSITY MAIN CAMPUS	N/A
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KHAREN C. GERARDO	CARIBBO NATIONAL HIGH SCHOOL	N/A								
JAY C. BANSAL	VISAYAS STATE UNIVERSITY MAIN CAMPUS	N/A								
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 border="1"><tr><td>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: 1107-21-20163</td></tr><tr><td>ID/License/Passport No.:</td></tr><tr><td>Date/Place of Issuance:</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: 1107-21-20163	ID/License/Passport No.:	Date/Place of Issuance:	<table border="1"><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	Date Accomplished		
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SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.										
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