

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	Ocañada		
FIRST NAME	Jemuel	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	Abellana		
3. DATE OF BIRTH (mm/dd/yyyy)	09/04/1993	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	Baybay City, Leyte	If holder of dual citizenship, please indicate the details.	Philippines
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	A. Tavera St.. House/Block/Lot No. Street Poblacion Zone 15 Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province 6521
7. HEIGHT (m)	1.71	18. PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
8. WEIGHT (kg)	99.00		
9. BLOOD TYPE	A+		
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	121130178904		
12. PHILHEALTH NO.	130252516284	ZIP CODE	
13. SSS NO.	0638500675	19. TELEPHONE NO.	(
14. TIN NO.	459282473	20. MOBILE NO.	975-154-2160
15. AGENCY EMPLOYEE NO.	V02032	21. E-MAIL ADDRESS (if any)	jemuel.ocanada@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Ocañada		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Ana Lea	NAME EXTENSION (JR., SR)	Juvann Anthon O. Ocañada	05/11/2020
MIDDLE NAME	Oraño		Juhann Anthon O. Ocañada	05/11/2020
OCCUPATION	Branch Associate			
EMPLOYER/BUSINESS NAME	EUPI-PPS			
BUSINESS ADDRESS	Puerto Princesa Palawan			
TELEPHONE NO.	09651338384			
24. FATHER'S SURNAME	Ocañada			
FIRST NAME	Edgardo	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Gomez			
25. MOTHER'S MAIDEN NAME	Cruza			
SURNAME	Ocañada			
FIRST NAME	Flora			
MIDDLE NAME	Abellana		(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	Baybay I Central School	Elementary	1999	2005		2005	N/A
SECONDARY	Baybay National High School	High School	2005	2009		2009	N/A
VOCATIONAL/ TRADE COURSE	N/A						
COLLEGE	Visayas State University	Bachelor of Science in Agribusiness	2009	2014		2014	N/A
GRADUATE STUDIES	College of Maasin	Master in Public Administration	2022		18		N/A

SIGNATURE		DATE	12/04/2023
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#### IV. CIVIL SERVICE ELIGIBILITY

[illegible]

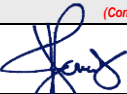
(Continue on separate sheet if necessary)



## V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

<b>SIGNATURE</b>		<b>DATE</b>	12/04/2023
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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			
	N/A	N/A	N/A	N/A	N/A	
(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			
	Mental Health: Challenge to Everyone	10/15/2023	10/15/2023	3	Technical	The College of Maasin
	"The Rice Crisis: Smuggling and Hoarding"	10/14/2023	10/14/2023	3	Technical	The College of Maasin
	Navigating Work Ethics: Discussions on Integrity, Values, and Professionalism	09/24/2023	09/24/2023	3	Technical	The College of Maasin - College Colloquium
	Risk Assessment Training	09/11/2023	09/12/2023	16	Technical	Office of the Vice President for Planning, Resource Generation and Auxiliary Services, Visayas State University
	ISO 9001:2015 Awareness & Re-awareness Webinar	08/29/2023	08/29/2023	4	Technical	Visayas State University
	Training on Republic Act No. 9184 and its 2016 Revised Implementing Rules and Regulations	08/22/2023	08/24/2023	24	Technical	Visayas State University
	Disaster Risk Reduction, and Management Planning	11/08/2022	11/11/2022	24	Technical	Office of the Civil Defense Region 8
	Managing Government Records and Human Resource Information System	10/26/2022	10/28/2022	24	Technical	Personnel Officers Association of the Philippines, Inc. (POAP)
	Orientation and Re-orientation of Security Guards Duties and Responsibilities and Incident Blotter Writing	09/14/2022	09/14/2022	8	Technical	OFFICE OF THE HEAD FOR GENERAL SERVICES
	Community-Based Disaster and Risk-Reduction Management (CBDRRM) - Training (F2F)	06/04/2022	06/04/2022	8	Technical	Philippine KOICA Fellow Association Inc. (PHILKOFA)
	Virtual Data Privacy Act of 2012 Awareness Seminar	04/07/2022	04/07/2022	8	Technical	VSU Chief Legal Officer
	ISO 9001:2015 Awareness/ Re-awareness Webinar	11/27/2020	11/27/2020	8	Technical	Quality Assurance Center, Visayas State University
	Document Tracking System	11/13/2020	11/13/2020	3	Technical	Human Resource Information System, Visayas State University
	Digital Jobs Ph	09/03/2019	11/05/2019	96	Technical	DICT - Baybay City, Leyte
(Continue on separate sheet if necessary)						
VIII. OTHER INFORMATION						
31.	SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
	Photography	N/A		N/A		
	Photo editing					
	Photoshop					
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	12/04/2023	

<div>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)?</div>		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div></div>												
<div>35. a. Have you ever been found guilty of any administrative offense?  b. Have you been criminally charged before any court?</div>		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div></div></div>												
<div>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</div>		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div></div>												
<div>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?</div>		<div><div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div><div>If YES, give details: Resignation _____</div></div>												
<div>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?</div>		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div></div></div>												
<div>39. Have you acquired the status of an immigrant or permanent resident of another country?</div>		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details (country): _____</div></div>												
<div>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?</div>		<div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify: _____</div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify ID No _____</div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify ID No _____</div></div></div>												
<div>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</div> <table><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr><tr><td>ARMEL GONZAGA</td><td>Brgy. Kan-asi Baybay City, Leyte</td><td>09154384487</td></tr><tr><td>DARIO P. LINA</td><td>VSU</td><td>09566807275</td></tr><tr><td>THELMA ZAFRA</td><td>30 de Diciembre St. Baybay City, Leyte</td><td>09173065494</td></tr></table>			NAME	ADDRESS	TEL. NO.	ARMEL GONZAGA	Brgy. Kan-asi Baybay City, Leyte	09154384487	DARIO P. LINA	VSU	09566807275	THELMA ZAFRA	30 de Diciembre St. Baybay City, Leyte	09173065494
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THELMA ZAFRA	30 de Diciembre St. Baybay City, Leyte	09173065494												
<div>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.</div>		<div><div>PHOTO</div></div>												
<div><div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div><div>Government Issued ID: TIN</div><div>ID/License/Passport No.: 459282473</div><div>Date/Place of Issuance: 10/21/2014 / Ormoc City, Leyte</div></div>	<div><div></div><div>Signature (Sign inside the box)</div><div>12/04/2023</div><div>Date Accomplished</div></div>	<div><div></div><div>Right Thumbmark</div></div>												
<div>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</div> <div><div></div><div>Person Administering Oath</div></div>														