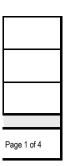
## **PERSONAL DATA SHEET**

W ARNING: 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

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. 1. CS ID No. Print legibly. Tick appropriate boxes ( and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. I PERSONAL INFORMATION 2. SURNAME **GONZALES** NAME EXTENSION (JR., SR) **GENOVIVA** FIRST NAME MIDDLE NAME BAEL 3. DATE OF BIRTH 16. CITIZENSHIP ▼ Filipino ☐ Dual Citizenship (mm/dd/yyyy) 17/11/1998 bv birth by naturaliza 4 PLACE OF BIRTH **GUIUAN EASTERN SAMAR** If holder of dual citizenship Pls. indicate country: please indicate the details **▼** Female ☐ Male 5. SEX ✓ Single □ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No. Street □ Separated **GUADALUPE** ☐ Other/s: Subdivision/Village Barangay BAYBAY LEYTE 7. HEIGHT (m) 150 Citv/Municipality Province 8. WEIGHT (kg) 39.4 ZIP CODE 6521 18. PERMANENT ADDRESS BLK. 4, LOT.15 VISAYAS DRIVE 9. BLOOD TYPE 0 House/Block/Lot No Street KASSEL CITY ABUCAY 10. GSIS ID NO. Subdivision/Village Barangay TACLOBAN LEYTE 11 PAG-IRIG ID NO City/Municipality Province 12. PHILHEALTH NO. 13-202462777-6 ZIP CODE 6500 13. SSS NO. 06-4388891-9 19. TELEPHONE NO. 14 TIN NO 20. MOBILE NO. 09312171253 364-784-859-000 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) genovia.gonzales@vsu.edu.ph II. FAMILY BACKGROUND 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRT NAME EXTENSION (JR., SR) FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME **BUSINESS ADDRESS** TELEPHONE NO. 24. FATHER'S SURNAME **GONZALES** NAME EXTENSION (JR., SR) **CESARIO** FIRST NAME MIDDLE NAME **MONTALBAN** 25. MOTHER'S MAIDEN NAME **CADILLO GONZALES** SURNAME FIRST NAME **OTELIA** MIDDLE NAME **BAEL** (Continue on separate sheet if necessary) III. EDUCATIONAL BACKGROUND HIGHEST LEVEL/ PERIOD OF ATTENDANCE 26 NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR I FVFI UNITS EARNED GRADUATED (Write in full) (Write in full) (if not graduated) То From ELEMENTARY BRGY. LUPOK GUIUAN EASTERN SAMAR 2011 SECONDARY ST. MARY'S ACADEMY OF GUIUAN N/A 2016

VOCATIONAL / TRADE COURSE	N/A	N/A				
COLLEGE	LEYTE NORMAL UNIVERSITY	BACHELOR OF SECONDARY EDUCATION				2019
GRADUATE STUDIES						
(Continue on separate sheet if necessary)						
SIGNATURE		DATE			CS FORM 21	2 (Revised 2017),

concerned. For CSC use only ation TH (mm/dd/yyyy) SCHOLARSHIP/ ACADEMIC HONORS RECEIVED



IV. CIVIL SE	ERVICE ELIG	IBILITY							
27. CAREE		080 (BOARD/ BAR) UNDER	RATING	DATE OF				LICENSE (if a	pplicable)
BAF		NS/ CES/ CSEE TY / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	HON / CONFER	MENI	NUMBER	Date of Validity
LICENSU	JRE EXAMINA	TION FOR TEACHER		29/09/2019	SAGKAHAN NATIO	NAL HIGHS	CHOOL	1820046	11/17/2022
V. WORK E	XPERIENCE		(Con	ntinue on separate sheet	if necessary)				
(Include priva	ate employmer	nt. Start from your recent	work) Description	of duties should be	indicated in the attached	Work Exper			
	JSIVE DATES m/dd/yyyy)	POSITION T			ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP	STATUS OF APPOINTMENT	GOV'T SERVICE
(Write in full/Do not al		abbreviate)	(vvnte in fui	SALARY	(Format "00-0")/ INCREMENT	APPOINTMENT	(Y/ N)		
N/A	N/A	N/A			N/A	N/A	N/A	N/A	N/A
			(6)	atinuo on accordant	if necessary)				
SIGNA	ATURE		(Con	ntinue on separate sheet  DATE	ii necessary)		CS FORM 2	12 (Revised 2017), I	Page 2 of 4
5.0.1/								. ,,	-

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S						
29. NAME & ADDRESS OF OF (Write in full)		INCLUSIV (mm/di	E DATES d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK
N/A		N/A		N/A	N/A	
	(Cont	inue on separate s	heet if necessarv)			
VII. LEARNING AND DEVELOPMENT (L&D) (Start from the most recent L&D/training program and include	INTERVENTIONS/TRAINING PR	ROGRAMS AT	TENDED	/Executive/Manage	rial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)		INCLUSIVE ATTEN (mm/d		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
N/A				N/A	N/A	N/A
	(Cont	inue on separate s	heet 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)
COMPUTER SKILLS	N/A				INTERACT SOCIETY	
PEOPLE SKILLS						
EMPATHY						

ARRANGING THINGS IN ORDER						
TAKING INITIATIVE						
(Continue on separate sheet if necessary)						
SIGNATURE	DATE			CS FORM 212 (Revised 2017), Page 3 of 4		

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 apppointed,					
	a. within the third degree?		☐ YES ☑ NO		
	b. within the fourth degree (for Local Government Unit - Care	eer Employees)?	☐ YES ☐ NO		
	• (	, ,	If YES, give details:		
			11 125, givo dotalio.		
	The second section of the sect				
35.	a. Have you ever been found guilty of any administrative offe	ense?	☐ YES ☑ NO		
			If YES, give details:		
	b. Have you been criminally charged before any court?		☐ YES ☑ NO		
			If YES, give details:		
			Date Filed:		
			Status of Case/s:		
36.	Have you ever been convicted of any crime or violation of an	ny law, decree, ordinance or regulation by	☐ YES ☑ NO		
	any court or tribunal?		If YES, give details:		
			ii 120, givo dotaiio.		
37.	Have you ever been separated from the service in any of the		☐ YES ☑ NO		
	dropped from the rolls, dismissal, termination, end of term, fir	nished contract or phased out (abolition)	If YES, give details:		
	in the public or private sector?				
38.	a. Have you ever been a candidate in a national or local elec-	ction held within the last year (except	☐ YES ☑ NO		
	Barangay election)?		If YES, give details:		
		4 (0) 4 1 1 1	-		
	b. Have you resigned from the government service during the		☐ YES ☑ NO		
	election to promote/actively campaign for a national or local	candidate?	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):		
			-, 3		
40	Pursuant to: (a) Indigenous Poople's Act (PA 9371); (b) Mag	no Corto for Disabled Persons (DA			
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?		☐ YES ☑ NO If YES, please specify:		
h	A				
b.	Are you a person with disability?		☐ YES ☑ NO If YES, please specify ID No:		
C.	Are you a solo parent?		☐ YES ☑ NO		
			If YES. please specify ID No:		
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /a	appointee)			
	NAME	ADDRESS	TEL. NO.		
	IVAIVIE	ADDRESS			
	RYAN G. DESTURA	TACLOBAN CITY	ryandestura @gmail.co		
	NINO VAL DACACI	TAGLODAN GITY			
	NINO VAL PACAOL	TACLOBAN CITY	09662982595		
42	I declare under oath that I have personally accomplished thi	s Personal Data Sheet which is a true as	rrect and complete		
	statement pursuant to the provisions of pertinent laws, rules				
	the agency head / authorized representative to verify	· · · · · · · · · · · · · · · · · · ·			
	misrepresentation made in this document and its attachment		•		
	against me.	3			
Go	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)				
PL	EASE INDICATE ID Number and Date of Issuance				
Go	overnment Issued ID: 1820046				
	// icana/Dassard No				
וט/	License/Passport No.: 1820046	<u>()</u>			
Da	te/Place of Issuance: 12/23/2019	Date Accomplished	Right Thumbmark		
		Night mullionark			

SUBSCRIBED AND SWORN to before me this	, affiant exhibiting his/her validly issued government ID as indicated above.			
		7		
	Person Administering Oath	1		
		CS FORM 212 (Revised 2017), Page 4		

