

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	QUEVEDO			
FIRST NAME	MARK JOSHUA		NAME EXTENSION (JR., SR)	
MIDDLE NAME	SOMBILON			
3. DATE OF BIRTH (mm/dd/yyyy)	9/15/1991	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	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	COTTAGE L, DUPLEX HOUSING House/Block/Lot No. Street VISAYAS STATE UNIVERSITY PANGASUGAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province 6521-A	
7. HEIGHT (m)	1.89	18. PERMANENT ADDRESS	COTTAGE L, DUPLEX HOUSING House/Block/Lot No. Street VISAYAS STATE UNIVERSITY PANGASUGAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province 6521-A	
8. WEIGHT (kg)	74		ZIP CODE	6521-A
9. BLOOD TYPE	O			
10. GSIS ID NO.	021-1430-6209-8			
11. PAG-IBIG ID NO.	914070076336			
12. PHILHEALTH NO.	13-025145568-7			
13. SSS NO.	06-3325512-5	19. TELEPHONE NO.	(053) 563-7870	
14. TIN NO.	284-147-455	20. MOBILE NO.	09464729894	
15. AGENCY EMPLOYEE NO.	V000777	21. E-MAIL ADDRESS (if any)	mark.quevedo@vsu.edu.ph	

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME				
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
25. MOTHER'S MAIDEN NAME				
SURNAME				
FIRST NAME				
MIDDLE NAME			(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	VISCA FOUNDATION ELEMENTARY SCHOOL		6/26/1998	4/26/2004		2004	
SECONDARY	VISAYAS STATE UNIVERSITY, LABORATORY HIGH SCHOOL		6/26/2004	4/30/2008		2008	
VOCATIONAL / TRADE COURSE							
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN COMPUTER SCIENCE	6/26/2008	4/30/2012		2012	
GRADUATE STUDIES	UNIVERSITY OF SAN CARLOS	MASTER OF SCIENCE IN INFORMATION TECHNOLOGY	6/26/2014	6/26/2015	18		
	VISAYAS STATE UNIVERSITY	MASTER OF SCIENCE MAJOR IN AGRONOMY	6/26/2015	12/31/2018		2018	CHED

(Continue on separate sheet if necessary)

SIGNATURE		DATE	May 22, 2024	CS FORM 212 (Revised 2017), Page 1 of 4
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IV. CIVIL SERVICE ELIGIBILITY

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
				NUMBER	Date of Validity
NCIV (Programming)	PASSED	11/11/2011	Visayas State University		
CIVIL SERVICE PASSER	PASSED	10/26/2014	MAASIN CITY		

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE

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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			
	Workshop on Harmonizing University Policies for Micro-credentials	05/06/2024	05/07/2024	19	Technical/Managerial	Southeast Asian Regional Center for Graduate Study and Research in Agriculture (SEARCA)
	Digitization and Digital Preservation of Permanent Records for Easy Access and Retrieval	03/20/2024	03/22/2024	24	Technical	Government Records Officers' Association of the Philippines, Inc.
	Workshop on Program Accreditation	12/1/2024	12/1/2024	19.0	Technical	VSU
	Design Thinking Workshop	12/13/2023	12/13/2023	19.0	Technical	VSU
	HRIS Software Onboarding	6/12/2023	6/12/2023	8.0	Technical	VSU
	University Curriculum & Instruction Review	6/10/2023	6/10/2023	8.0	Technical	VSU
	ISO 9001:2005 Awareness & Re-awareness Webinar	08/29/2023	08/29/2023	8.0	Technical	VSU
	Training-Workshop on Curriculum and Instruction Review	08/31/2023	1/9/2023	19.0	Technical	VSU
	AgriCoolTure	8.18.2016	8.18.2016	8.0	Technical	PhilRice
	Alternative teaching approaches: "Do you think we are ready?"	7.28.2016	7.28.2016	8.0	Technical	VSU
	Workshop on data analysis using "SAS" and "R"	10/6/2014	11/6/2014	24.0	Technical	VSU
	National Conference on Development Initiatives in the Philippine Marginal Uplands	10.28.2013	10.30.2013	72.0	Technical	PHERNet, FPE, DA-ATI VIII
	Workshop on Journal Writing	10/12/2013	10/12/2013	8.0	Technical	PHERNet, De La Salle University

(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)
	Mechanic/Welder				CFC-SFC/CFC-YFC

(Continue on separate sheet if necessary)

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><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>												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
	<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</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><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</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><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</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><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
	<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</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><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><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)													
<table><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table>		NAME	ADDRESS	TEL. NO.									
NAME	ADDRESS	TEL. NO.											
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>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: UMID 021-1430-6209-8</div> <div>ID/License/Passport No.: Driver's License H12-10-000388</div> <div>Date/Place of Issuance: Baybay City</div>	<div></div> <div>Signature (Sign inside the box)</div> <div>May 22, 2024</div> <div>Date Accomplished</div>												
<div></div> <div>PHOTO</div> <div></div> <div>Right Thumbmark</div>													
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.													
<div> </div> <div>Person Administering Oath</div>													

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