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 SHI				1. CS ID No.		(Do not fill up. F	or CSC use only)	
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	Gallardo								
FIRST NAME	Robert Roy NAME EXTENSION (JR., SR)								
MIDDLE NAME	Yu								
3. DATE OF BIRTH (mm/dd/yyyy)	12/5/00	16. CITIZENSHIP		✓ Filipino ☐ Dual Citizenshi		Dual Citizenship	ip by naturalization		
4. PLACE OF BIRTH	Cebu City, Cebu	If holder of dual citizer	nship,	Pls. indicate country:			ountry:		
5. SEX	✓ Male Female	please indicate the de	tails.				•		
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS	C27 House/Block/Lot No.				Punta Street Macabalan		
7. HEIGHT (m)	1.55	-		odivision/Village agayan de Oro		N	Barangay lisamis Oriental		
		ZIP CODE	City/Municipality			0000	Province		
8. WEIGHT (kg)	42	18. PERMANENT ADDRESS		C27		9000	Punta		
9. BLOOD TYPE	0+	10. FERMANENT ADDICESS	Hou	se/Block/Lot N	0.		Street		
10. GSIS ID NO.			Subdivision/Village		е	Macabalan Barangay			
11. PAG-IBIG ID NO.				agayan de Oro ity/Municipality		Misamis Oriental Province			
12. PHILHEALTH NO.	ZIP CODE					9000			
13. SSS NO.		19. TELEPHONE NO.							
14. TIN NO.		20. MOBILE NO.	0976-243-7432						
15. AGENCY EMPLOYEE NO.	21. E-MAIL ADDRESS (if any) rry.gallardo@gmail.com								
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME		NAME EXTENSION (JR., SR)	23. NAME of CH	ILDREN (Write	e full name and	list all)	DATE OF BIRT	H (mm/dd/yyyy)	
FIRST NAME		NAME EXTENSION (JR., SR)							
MIDDLE NAME									
OCCUPATION									
EMPLOYER/BUSINESS NAME									
BUSINESS ADDRESS									
TELEPHONE NO.									
24. FATHER'S SURNAME	Gallardo	THAME EXTENSION (ID. OD)							
FIRST NAME	Andy	NAME EXTENSION (JR., SR)							
MIDDLE NAME	Dalman								
25. MOTHER'S MAIDEN NAME									
SURNAME	Yu								
FIRST NAME	Josephine								
MIDDLE NAME	Escario			(Co	ontinue on sep	parate sheet if neces	sary)		
III. EDUCATIONAL BACKG	ROUND							AGUAL ABAUUR	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF A	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
ELEMENTARY	City Central School	Elementary Diplom	a	7/1/09	3/14/14		2014	With Honors	
SECONDARY	Gusa Regional Science High School - X	High School Diplom	na	8/1/14	4/28/20		2020	With Honors	
VOCATIONAL / TRADE COURSE									
COLLEGE	University of the Philippines Los Baños	Bachelor of Science in A Biotechnology major in Cro Biotechnology		9/2/20	7/19/25		2025	Cum laude, DA-BPO Scholarship	
GRADUATE STUDIES									
	, (C	Continue on separate sheet if nece	essary)						
SIGNATURE	M	- 0		DA	TE		July 3, 2025	10047	
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IV. CIVIL S	SERVICE ELIG	GIBILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		RATING	DATE OF	DI ACE OF EVAMINIA	ATION / CONFERMENT		LICENSE (if applicable)		
		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFER	KIVIEN I	NUMBER	Date of Validity	
V. WORK	EXPERIENCE		(Coi	ntinue on separate sheet	tif necessary)				
(Include pri	vate employme		nt work) Descriptio	on of duties should	be indicated in the attacl	hed Work Ex		et.	
28. INCL	LUSIVE DATES mm/dd/yyyy)	POSITION T	TITLE	DEPARTMENT / AG	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOV'T	
From	To	- (Write in full/Do not abbreviate)		(Write in ful	SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVICE (Y/ N)	
7/15/24	7/26/24	Student In	tern	Research, Developm	ent, and Production Support			Internship	Υ
7/1/24	7/12/24	Student In	tern	Sugar Regulatory	Center Administration - La Granja lesearch Extension Center			Internship	Υ
6/24/24	6/28/24	Student In	tern	University of the Phil	ippines Los Baños La Granja nd Training Station			Internship	Υ
			(Coi	ntinue on separate sheet	if necessary)				
SIGN	IATURE		Mt 0		DATE		July	3, 2025	
		/	(I	CS	FORM 212 (Revised 20	017), Page 2 of

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT			ORGANIZATIO	ON/S		
29. NAME & ADDRESS OF OF (Write in full)			/E DATES d/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
UP Genetic Researchers and Agricultural Innova Laguna)	ators Society (UPLB, College,	11/1/23	7/19/25		Education and	Research Personnel	
Philippine Society of Youth Science Clubs (Diliman, Quezon City)			4/20/20		National Chairp	person for Science Clubs	
VII. LEARNING AND DEVELOPMENT (L&D)		tinue on separate :					
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) CONDUCTED/ SPONSORED BY Supervisory/ (Write in full) Technical(etc)		
IP in Focus:Creating Value through Intellec	tual Property Management	From 8/27/24	To 8/27/24	2.0	Technical	University of the Philippines Los Baños	
satisfies a second sec		0/21/24	0/21/24	2.0	recimiour	Technology Transfer and Business Development	
VIII. OTHER INFORMATION	(Con	tinue on separate :	sheet if necessary			_	
31. SPECIAL SKILLS and HOBBIES	32. NON	-ACADEMIC DISTIN		NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
Molecular biology techniques	Service Award LIDI R Perspective UP Genetic Researchers and Agricul				UP Genetic Researchers and Agricultural Innovators Society		
Microbiological techniques						UPLB Kaiban	
Research and technical writing						UP Alliance of Gamers	
Graphic Design	1					UPLB Perspective	
Science Communication							
Agricultural Extension			·	·	·		
		,					
SIGNATURE	(Con	tinue on separate	sneet if necessary		ATE	July 3, 2025	

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2017),

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						
Bureau or Department where you will be apppointed,						
a. within the third degree?	☐ YES ✓ NO					
b. within the fourth degree (for Local Government Unit - Car						
b. within the lourth degree (for Local Government offit - car	☐ YES ☑ NO					
		If YES, give details:				
35. a. Have you ever been found guilty of any administrative off	ense?	YES NO				
	If YES, give details:					
		ii 120, give details.				
b. Have you been criminally charged before any court?		☐ YES ✓ NO				
b. Have you been chillinally charged belote any court:	If YES, give details:					
	Date Filed:					
		Status of Case/s:				
		Status 01 Oase/s.				
36. Have you ever been convicted of any crime or violation of a	ny law, decree, ordinance or regulation	☐ YES ☑ NO				
by any court or tribunal?		If YES, give details:				
	-					
		-				
37. Have you ever been separated from the service in any of the		☐ YES ✓ NO				
retirement, dropped from the rolls, dismissal, termination, er	id of term, finished contract or phased	If YES, give details:				
out (abolition) in the public or private sector?						
38. a. Have you ever been a candidate in a national or local ele	ction held within the last year (except	☐ YES ☑ NO If YES, give details:				
Barangay election)?						
h. Have very resigned from the government comics during the	so three (2) month region before the last					
 b. Have you resigned from the government service during the election to promote/actively campaign for a national or local 		If YES, give details:				
election to promote/actively campaign for a national or local	Candidate !					
39. Have you acquired the status of an immigrant or permanent	resident of another country?	YES NO				
	If YES, give details (country):					
40 Duran at tay (a) Indiana and Danalala Ast (DA 0274), (b) Ma	and Contains Disabled December (DA					
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag						
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:				
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 /appointee)						
THE EXERCISE (I Grown not routed by containing or annuty to approach	ларроппосу					
NAME	ADDRESS	TEL. NO.				
NATHANIEL R. ALCANTARA	LOS BANOS, LAGUNA	nralcantara1				
		@up.edu.ph				
42. I declare under oath that I have personally accomplished	this Personal Data Sheet which is a tr	ue, correct and				
complete statement pursuant to the provisions of pertine	ent laws, rules and regulations of the	Republic of the				
Philippines. I authorize the agency head/authorized repre-						
I agree that any misrepresentation made in this doc	ument and its attachments shall caus	se the filing of PHOTO				
administrative/criminal case/s against me.						
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)	2					
PLEASE INDICATE ID Number and Date of Issuance						
Government Issued ID: National ID (PhilID)						
ID/Licence/Descript No : 6229 4057 2007 5025	ID/License/Passport No.: 6328-4957-3897-6935					
ID/License/Fassport No 6320-4937-3097-0933	Signature (Sign inside the b July 4, 2025	ox)				
Date/Place of Issuance: 12/09/22 PSA Headquarters, Quezon City	Right Thumbmark					
	raght mumbhan					
SUBSCRIBED AND SWORN to before me this	affiant exhibit	ing his/her validly issued government ID as indicated above.				
CODOS. ASES , AND OTTOTAL AS SOCIOLO HIS AND	, amant sambi					
<u> </u>						
	Person Administering Oat	b				