## 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 ( 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 Acampado NAME EXTENSION (JR., SR) FIRST NAME Dulce Amor MIDDLE NAME Cabahuq 3. DATE OF BIRTH 01/12/ 1994 16. CITIZENSHIP Dual Citizenship √ Filipino (mm/dd/yyyy) by birth by naturalization 4. PLACE OF BIRTH Pls. indicate country: Sulat Eastern Samar If holder of dual citizenship. please indicate the details. 5. SEX Male √ Female Ŧ 17. RESIDENTIAL ADDRESS #450 Centro [./] Sinale Married 6 CIVIL STATUS House/Block/Lot No Widowed Separated San Isidro Other/s: Subdivision/Village Barangay Baybay Leyte 7. HEIGHT (m) 1.68 City/Municipality Province 8. WEIGHT (kg) 51 kg ZIP CODE 6125 National Road 18. PERMANENT ADDRESS 9. BLOOD TYPE AB+ House/Block/Lot No. Street Riversidee 10. GSIS ID NO. N/A Subdivision/Village Barangay Eastern Samar 11. PAG-IBIG ID NO. N/A City/Municipalit 12. PHILHEALTH NO. 08-025954941-1 ZIP CODE 6815 13. SSS NO. N/A 19. TELEPHONE NO. N/A 14. TIN NO. 467-498-948-000 20. MOBILE NO. 09430431314 15. AGENCY EMPLOYEE NO. dulceamorca.13@gmail.com 21. E-MAIL ADDRESS (if anv) II. FAMILY BACKGROUND N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) 22. SPOUSE'S SURNAME N/A Jade Ferlee A. Casinillo FIRST NAME N/A 04/16/2013 Clyde Andre A. Albero N/A 09/14/2020 MIDDLE NAME N/A OCCUPATION EMPLOYER/BUSINESS NAME N/A N/A BUSINESS ADDRESS TELEPHONE NO. N/A Acampado 24. FATHER'S SURNAME N/A FIRST NAME Alexander MIDDLE NAME Dela Cueva 25. MOTHER'S MAIDEN NAME Cabahug SURNAME FIRST NAME Rosario (Continue on separate sheet if necessary) Biagcong MIDDLE NAME **EDUCATIONAL BACKGROUND** SCHOLARSHIP/ HIGHEST LEVEL/ 26. PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR ACADEMIC LEVEL UNITS EARNED (Write in full) (Write in full) GRADUATED HONORS (if not graduated) From RECEIVED ELEMENTARY 2006 Sulat Central Elementary School N/A 2000-10-06 03/30/2006 Graduate with honors SECONDARY Sulat National Highschool Ν/Δ 2006-10-06 03/31/2010 Graduate 2010 with honors VOCATIONAL / TESDA-SNSAT 2016 N/A Cookery 2015-10-03 01/31/2016 Graduate TRADE COURSE COLLEGE 2020 N/A Visayas State University 09/30/2020 **Bachelor of Science in Agriculture** 2016-10-08 Graduate GRADUATE STUDIES Visayas State University Master of Science in Agriculture 2021-10-01 Present 28 units N/A N/A SIGNATURE DATE SEPTEMBER 04, 2022

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	ERVICE ELIG SERVICE/ RA 1080		DATING	DATE OF EVALUATION				LICENSE (if a	pplicable)
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	DATE OF EXAMINATION / PLACE OF EXAMIN		ATION / CONFERMENT		NUMBER	Date of Validity
N/A		N/A	N/A I		N/A		N/A	N/A	
V. WORK E	XPERIENCE		(Co	ntinue on separate sheet i	f necessary)	-	_	_	-
(Include priva	te employment	Start from your recent wo	ork) Description of a	luties should be indic	ated in the attached Work	Experience :			
	JSIVE DATES m/dd/yyyy)	POSITION TI		DEPARTMENT / AGENCY / OFFICE / COMPANY MONTHLY GRADE		SALARY/JOB/PAY GRADE(ifapplicable)& STEP (Format"00-0")/	STATUS OF	GOV'T SERVICE	
From	То	(Write in full/Do not	auuleviale)	(Write in full/Do not abbreviate)		SALARY	INCREMENT	APPOINTMENT	(Y/ N)
2016-05-02	07/15/2022	Service Cı	rew	Jollibee Food Corporations		9, 000	SG 8	Contractual	N
2015-09-05	01/31/2016	Sales Asso	ciate	Shop	owise Imus	6, 000	SG 5	Contractual	N
2011-10-09	2011-08-12	Cashie	r	Super Val	ue Corporation	9, 000	SG 10	Contractual	N
	l		(Co)	ntinue on separate sheet i	f necessary)				
SIGNATURE DATE SEPTEMBER 04, 20									
								CS FORM 212 (Revised :	2017), Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF ORGANIZATION (Write in full)			VE DATES d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
Plant Protection Majors Association - Baybay City, Leyte				8 hrs/day	Secretary		
		2018-10-06		,	-		
		Continue on conse	to about if we access	and a			
VII. LEARNING AND DEVELOPMENT (L&D)		Continue on separa OGRAMS ATI		ry)			
30. TITLE OF LEARNING AND DEVELOPMENT INTEL (Write in full)	INCLUSIVE DATES OF ATTENDANG (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)		
Marking with Foresting the Pinter Fore		From	То		Technical/etc)		
Working with Fungi in the Digital Era		06/24/2022	06/24/2022	8.0	Supervisory	Mycological Society of the Philppines, Inc.	
Plantation Herbecide Resistance Management Webinar		2022-09-06	06/100/2022	16.0	Supervisory	The CropLife Philippines inc.	
Getting to Know Black Soldier Fly and Its Potential  Vector Biology, Ecology and Control of Arthropods: Che	emical Resistance and Control of	2022-09-06		3.0	Supervisory	Bureau of Plant Industry  De La Salle University Biology Department and the Biologica	
Arthropod Pests		2022-04-06	2022-04-06	3.0	Supervisory	Control Research Unit	
	(I	Continue on separa	te sheet if necessa	ry)			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
Cooking	N/A				Plant Protection Majors Association Secretary		
Driving							
Can operate Microsscope							
Internet surfing							
Playing volleyball							
Swimming							
Travel		Continuo on cons	to chact if name	eu)			
SIGNATURE	La de la companya de	Continue on separa	te sneet IT necessa		ATE	SEPTEMBER 04, 2022	
	1 010					. , .	

34.	Are you related by consanguinity or affinity to the appointing 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 NO					
	b. within the fourth degree (for Local Government Unit - Care	eer Employees)?	YES	NO NO				
		If YES, give details:	_					
35	a. Have you ever been found guilty of any administrative offe	ense?	YES	√ NO				
00.			If YES, give details:	,/ NO				
		11 120, givo dotano.						
	b. Have you been criminally charged before any court?		YESNO   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 7 NO					
	any court or tribunal?		If YES, give details:					
37.	Have you ever been separated from the service in any of the		·/ YES	□ NO				
	dropped from the rolls, dismissal, termination, end of term, fi	nished contract or phased out (abolition) in	If YES, give details:					
	the public or private sector?	otion hold within the least one - /	End of contract					
38.	A. Have you ever been a candidate in a national or local ele Barangay election)?	☐ YES						
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	YES NO 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):					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag							
	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 VO NO If YES, please specify:					
b.	Are you a person with disability?		YES 7 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)						
	NAME	ADDRESS	TEL. NO.					
	Robelyn Piamonte	Baybay City, Leyte	N/A					
-			N/A					
Justine Bennette Milladdo		Baybay City, Leyte	N/A					
	Fely Cañete	Baybay City, Leyte	N/A					
42.	ractions are constructed and construction and constructio							
	statement pursuant to the provisions of pertinent laws, rules							
	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.								
C	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)							
	LEASE INDICATE ID Number and Date of Issuance		with the second of the second					
G	overnment Issued ID: UMID		Mary Supplicity					
	)/License/Passport No.: 011158902907		The state of the s					
l H		2 2						
L	ate/Place of Issuance: Sulat Eastern Samar	Date Accomplished	Right Thumbmark					
	SUBSCRIBED AND SWORN to before me this , affiant exhibiting his/her validly issued government ID as indicated above.							
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	L							
		Person Administering Oath	1					