SIGNATURE

Revised 2017

## **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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. 1. CS ID No. (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes 🔲 ) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE 2. SURNAME **BONGCALES** NAME EXTENSION (JR., SR) FIRST NAME MARIAN SACRO MIDDLE NAME 3. DATE OF BIRTH 24/08/1996 16. CITIZENSHIP √ Filipino Dual Citizenship (mm/dd/yyyy) 4. PLACE OF BIRTH BAYBAY, LEYTE If holder of dual citizenship, Pls. indicate country: please indicate the details. Male √ Female 5. SEX Single ✓ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No Widowed Separated BRGY GUADALUPE Other/s: Barangay Subdivision/Village BAYBAY CITY LEYTE 7. HEIGHT (m) 1.53 City/Municipality 52 8. WEIGHT (kg) ZIP CODE 6521 18. PERMANENT ADDRESS 0' 9. BLOOD TYPE House/Block/Lot No Street BRGY. GUADALUPE 10 GSIS ID NO N/A Subdivision/Village Barangay BAYBAY CITY, LEYTE 11. PAG-IBIG ID NO. 121266359022 City/Municipality Province 13-252952848-9 12 PHILHEALTH NO ZIP CODE 6521 13. SSS NO. N/A 19. TELEPHONE NO. N/A 763-843-930 09368135015/09201035896 14. TIN NO. 20. MOBILE NO. 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) marian.sacro@vsu.edu.ph FAMILY BACKGROUND 22. SPOUSE'S SURNAME **BONGCALES** 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) CALYX GIDEON LOUISE S. BONGCALES FIRST NAME MARK LOUISE 01/02/2023 MIDDLE NAME **OBEÑA ELECTRICIAN** OCCUPATION EMPLOYER/BUSINESS NAME N/A N/A **BUSINESS ADDRESS** N/A TELEPHONE NO. 24. FATHER'S SURNAME **SACRO** IAME EXTENSION (JR., SR) **FELIX** FIRST NAME **BITOY** MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME **GRANADA HERNANE** FIRST NAME MIDDLE NAME **IBAÑEZ** (Continue on separate sheet if necessary) III. EDUCATIONAL BACKGROUND SCHOLARSHIP/ PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR ACADEMIC LEVEL UNITS EARNED HONORS RECEIVED GRADUATED (Write in full) (Write in full) (if not graduated) From То BAYBAY I CENTRAL SCHOOL 2009 **ELEMENTARY** N/A 2003 2009 N/A N/A SECONDARY **BAYBAY NATIONAL HIGH SCHOOL** N/A 2013 2009 2013 N/A N/A VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A TRADE COURSE COLLEGE **VISAYAS STATE UNIVERSITY BACHELOR OF SCIENCE IN AGRIBUSINESS** 2015 2019 N/A 2019 N/A GRADUATE STUDIES VISAYAS STATE UNIVERSITY MASTER IN MANAGEMENT 2021 2022 12 UNITS N/A

November 25, 2023

DATE

IV. CIVIL S	ERVICE ELIG	BILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER			RATING	DATE OF				LICENSE (if applicable)	
			(If Applicable)	EXAMINATION / CONFERMENT	TION / CONFERMENT		NUMBER	Date of Validity	
LICENSED AGRICULTURIST 80.00			NOV. 5-7, 2019	TACLOBAN CITY, LEYTE			0031921	8/24/2026	
Career Service (Professional) 82.87			82.87	20/08/2023	Maasin City, Leyte			NA	NA
			(Cor	ntinue on separate sheet	if necessary)				
	EXPERIENCE		nt work) Description	on of duties should	be indicated in the attach	ed Work Ev	narianca sha	of.	
28. INCLU	JSIVE DATES	POSITION T				MONTHLY	SALARY/ JOB/ PAY GRADE (if		GOV'T
From (mi	m/dd/yyyy) To	(Write in full/Do not		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/ N)
	PRESENT	ADMIN. AII	DE III		ISTRAR - Visayas State	13274.80	N/A	JOB ORDER	Υ
04/30/2014	04/30/2015	Computer Café	Attendant	Univeristy  Xceline Computer Shop		3500.00	NA	NA	N
09/01/2018	12/15/2018	Student Ass	istant	VSU Department of Business Management		25/hour	NA	NA	N
01011471157		fi an' a		ntinue on separate sheet			N	2000	
SIGNATURE		on our l			DATE		November 25, 2	2 <b>023</b> FORM 212 (Revised 20	

29. NAME & ADDRESS OF			IVE DATES				
(Write in t	ull)	(mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK		
N/A		N/A	N/A	N/A		N/A	
			sheet if necessary				
VII. LEARNING AND DEVELOPMENT (L&	D) INTERVENTIONS/TRAINING P			1			
30. TITLE OF LEARNING AND DEVELOPMENT IN (Write in 1		ATTEN (mm/c	E DATES OF NDANCE dd/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
PURCHASE REQUEST (PR) MODULE OF THE SUPP	LY PROPERTIES PROCUREMENT	From 08/28/2020	To 08/28/2020	4		VSU SPPMIS	
MANAGEMENT INFORMATION SYSTEMS (SPPMIS) DOCUMENT TRACKING SYSTEMS		11/13/2020	11/13/2020	3		VSU HRIS	
Mental Health Awareness Seminar		04/25/2023	04/25/2023	3		VOC TITUE	
00 0004 004F A I D W. I.'.		04/25/2025	04/25/2025			VSU HRMO	
ISO 9001:2015 Awareness and Re-awareness Webina		8/29/2023	8/29/2023	3		VSU	
ISO 9001:2015 Awareness and Re-awareness Webina	<del>-</del>	8/30/2023	8/30/2023	3		VSU	
Breaking Limits: Be an Effective Speaker		11/27/2018	11/27/2018	4		VSU	
outh Entrepreneurship: Entrepreneurial Mindsetting a	nd Business Planning	4/24/2018	4/24/2018	8		DTI Leyte	
VIII. OTHER INFORMATION	(Con	ntinue on separate	sheet if necessary				
31. SPECIAL SKILLS and HOBBIES	32. NON		NCTIONS / RECOG	INITION		MEMBERSHIP IN ASSOCIATION/ORGANIZATION	
EVALUATION	SZ. (Write in full)  N/A				Philippine Association of Agriculturist Inc.		
		N/A					
READING/WRITING							
COMMUNICATION							
Computer							
Higly Organize							
		- <b>G</b>	-h4/5				
SIGNATURE	franci	nunue on separate	sheet if necessary		ATE	November 25, 2023	
OIGHAI UNL	()			<i>U</i> ,		1	

34. Are you related by consanguinity or affinity to the appointing							
chief of bureau or office or to the person who has immediate	e supervision over you in the Office,						
Bureau or Department where you will be apppointed,							
a. within the third degree?		YES ✓					
b. within the fourth degree (for Local Government Unit - Car	reer Employees)?	YES /	NO				
		If YES, give details:					
35. a. Have you ever been found guilty of any administrative of	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 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 th	e following modes: resignation,	☐ YES ✓	NO				
retirement, dropped from the rolls, dismissal, termination, en	nd 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					
Barangay election)?		If YES, give details:					
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	t resident of another country?	☐ YES					
		If YES, give details (country):					
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma							
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    If YES, please specify:	✓ NO				
b. Are you a person with disability?	Are you a person with disability?						
7 to you a poroon that aloubinty.	Are you a person with disability?						
c. Are you a solo parent?		If YES, please specify ID No:					
		If YES, please specify ID	No:				
41. REFERENCES (Person not related by consanguinity or affinity to applican	t /appointee)						
NAME	ADDRESS	TEL. NO.					
RENATO A. MAALA	DAVDAY CITY I FVTF	9606090137					
RENATO A. MAALA	BAYBAY CITY, LEYTE	3000030137	(3 6				
NORMA O. VILLAS	VISCA, BAYBAY CITY, LEYTE	9061023570					
LOUISA MARIE B. ANDRADE	STA. CRUZ, BAYBAY CITY, LEYTE	563-7527					
42. I declare under oath that I have personally accomplished	· ·	rue correct and					
complete statement pursuant to the provisions of pertine							
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.							
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)							
PLEASE INDICATE ID Number and Date of Issuance	0.						
Government Issued ID: PRC ID							
ID/License/Passport No.: 0031921	ox)						
Date/Place of Issuance: PRC ORMOC	(OX)	444					
Date Frace of Issuance.	T.	Right Thumbmark					
SUBSCRIBED AND SWORN to before me this	officent exhibit	ting his/hor validly issued gov	vernment ID as indicated above				
SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.							
	Person Administering Oa	th.					