

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	MORALES		
FIRST NAME	JINA MAY	NAME EXTENSION (JR., SR)	
MIDDLE NAME	BULAHAN		
3. DATE OF BIRTH (mm/dd/yyyy)	5/5/1996	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	TOLEDO CITY	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" 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	639 SITIO KALUBIHAN House/Block/Lot No. Street IBO Subdivision/Village Barangay TOLEDO CEBU City/Municipality Province
7. HEIGHT (m)	152	ZIP CODE	6038
8. WEIGHT (kg)	59		
9. BLOOD TYPE	TYPE O	18. PERMANENT ADDRESS	639 SITIO KALUBIHAN House/Block/Lot No. Street IBO Subdivision/Village Barangay TOLEDO CEBU City/Municipality Province
10. GSIS ID NO.		ZIP CODE	6038
11. PAG-IBIG ID NO.	121159762315		
12. PHILHEALTH NO.	12-025482540-4		
13. SSS NO.	06-376857-3	19. TELEPHONE NO.	N/A
14. TIN NO.	324-951-210-000	20. MOBILE NO.	09202530830
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	jinaamay.morales@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	N/A		N/A	N/A
OCCUPATION	N/A		N/A	N/A
EMPLOYER/BUSINESS NAME	N/A		N/A	N/A
BUSINESS ADDRESS	N/A		N/A	N/A
TELEPHONE NO.	N/A		N/A	N/A
24. FATHER'S SURNAME	MORALES			
FIRST NAME	JIMMY	NAME EXTENSION (JR., SR)		
MIDDLE NAME	NIEVES			
25. MOTHER'S MAIDEN NAME				
SURNAME	BULAHAN			
FIRST NAME	LORENZA			
MIDDLE NAME	CABAÑOG		(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	IBO ELEMENTARY SCHOOL	ELEMENTARY	6/13/2002	3/21/2008		2008	FIRST HON. MENTION
SECONDARY	BATO NATIONAL HIGH SCHOOL	HIGH SCHOOL	6/8/2008	4/24/2012		2012	ACHIEVER
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	CEBU TECHNOLOGICAL UNIVERSITY-BARILI CAMPUS	BS AGRICULTURE MAJOR IN HORTICULTURE	6/13/2012	3/28/2017		2017	CUM LAUDE
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY-MAIN CAMPUS	DOCTOR OF PHILOSOPHY IN HORTICULTURE MINOR IN PLANT PATHOLOGY	8/5/2020	PRESENT		ON GOING	DOST ASTHRDP

SIGNATURE

DATE

May 8, 2024

IV. CIVIL SERVICE ELIGIBILITY

[illegible]


(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]


(Continue on separate sheet if necessary)

SIGNATURE		DATE	5/8/2024
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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			
	PHILIPPINE ASSOCIATION OF PLANT TISSUE CULTURE AND BIOTECHNOLOGY	4/9/2018	PRESENT	40.0	MEMBER	
(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			
	A FORUM ON METABOLIC ENGINEERING, CHRONOBIOLOGY, AND NANAOTECH APPLICATIONS IN AGRICULTURE	3/21/2024	3/21/2024	5.0	TECHNICAL	DEPARTMENT OF PEST AND MANAGEMENT-VSU
	SCIENCE INFORMATION FORUM ON INNOVATION (NAST INNOVATION SERIES)	3/20/2024	3/20/2024	8.0	SUPERVISORY	NATIONAL ACADEMY OF SCIENCE AND TECHNOLOGY -DOST
	STUDENT TRAINING IN MACAPUNO EMBRYO CULTURE	10/13/2023	10/16/2023	16.0	TECHNICAL	NATIONAL COCONUT AND RESEARCH CENTER
	BASIC TECHNIQUES IN MOLECULAR DATA PROCESSING AND ANALYSIS IN AGRICULTURE	8/30/2023	8/30/2023	8.0	TECHNICAL	DEPARTMENT OF PEST AND MANAGEMENT VSU
	2ND S&T FELLOWS CONVENTION:KATUWANG SA PAGTUKLAS AT PAGPAPAPUNLAD TUNGO SA MASAGANANG KINABUKASAN	7/21/2023	7/21/2023	8.0	SUPERVISORY	DEPARTMENT OF SCIENCE AND TECHNOLOGY
	STATISTICS FOR EXPERIMENTAL RESEARCH:STAARDEC WEBINAR SERIES TO STRENGTHEN THE COMPETENCIES OF RESEARCHERS/EXTENSIONIST	6/27/2023	6/27/2023	8.0	TECHNICAL/ SUPERVISORY	SOUTHERN TAGALOG AGRICULTURE, AQUATIC AND RESOURCE RESEARCH
	NANOBIOTECHNOLOGY APPLICATION FOR THE MANAGEMENT OF CROP PESTS AND DISEASES	9/27/2022	9/27/2022	8.0	TECHNICAL	NATIONAL CROP PROTECTION CENTER, CAFS, UNIVERSITY OF THE PHILIPPINES, LOS BANOS
	TRAINING WORKSHOP ON QUALITY ASSURANCE/ QUALITY CONTROL (QA/QC) AND METHOD VERIFICATION/VALIDATION	8/3/2022	8/4/2022	16.0	TECHNICAL/ SUPERVISORY	BUREAU OF SOILS AND WATER MANAGEMENT
	REGISTRY SYSTEM FOR BASIC SECTOR IN AGRICULTURE (RSBSA) FARMERS AND FISHERFOLKS ENTERPRISE DEVELOPMENT INFORMATION SYSTEM (FFEDIS)	8/18/2022	8/18/2022	8.0	TECHNICAL/ SUPERVISORY	DEPARTMENT OF SCIENCE AND TECHNOLOGY
	FARM DIVERSIFICATION WITH HIGH VALUE CROPS: KEY TO RECOVERY AND SUSTAINED GROWTH	7/14/2022	7/14/2022	8.0	TECHNICAL	DEPARTMENT OF SCIENCE AND TECHNOLOGY
	NRCP REGIONAL BASIC RESEARCH CARAVAN	1/20/2021	1/20/2021		TECHNICAL	NRCP-DEPARTMENT OF SCIENCE AND TECHNOLOGY
	1ST MULTI-DISCIPLINARY RESEARCH CONGRESS	10/25/2019	10/25/2019	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY-ISABEL
	SEARCA REGIONAL PROFESSORIAL CHAIR LECTURE ON CLIMATE PROOFING AND INTEGRATED CROP MANAGEMENT(CIM) TO ENHANCE VEGETABLE PROFITABILITY	3/8/2019	3/8/2019	8.0	SUPERVISORY/ TECHNICAL	VISAYAS STATE UNIVERSITY
	ORGANIC HERB GARANULE PRODUCTION	11/18/2018	11/18/2018	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	ASIAN ASSOCIATION OF AGRICULTURAL COLLEGES AND UNIVERSITIES 22ND BIENNIAL CONFERENCE AND GENERAL ASSEMBLY	10/15/2018	10/18/2018	32.0	SUPERVISORY/MANAGERIAL	VISAYAS STATE UNIVERSITY
	AGING LESSON FROM A TINY WORM	8/15/2018	8/15/2018	8.0	TECHNICAL/ SUPERVISORY	VISAYAS STATE UNIVERSITY
	11TH PAPTCB SCIENTIFIC CONVENTION. PHILIPPINE ASSOCIATION OF PLANT TISSUE CULTURE AND BIOTECHNOLOGY	7/9/2018	7/14/2018	40.0	TECHNICAL/ SUPERVISORY	PAPTCB/ BOHOL BEE FARM, DAUIS, BOHOL
	16TH NATIONAL VEGETABLE CONGRESS	9/27/2017	9/29/2017	24.0	SUPERVISORY	TACLOBAN, LEYTE/ DEPARTMENT OF AGRICULTURE REGION 8
	BANANA-SABA PRODUCTION ENHANCEMENT TRAINING	4/5/2017	4/6/2017	16.0	TECHNICAL	DA- REGION 7
	15TH ANNUAL RESEARCH AND DEVELOPMENT CONGRESS	1/10/2017	1/13/2017	24.0	TECHNICAL	CEBU TECHNOLOGICAL UNIVERSITY
	ANIMAL NUTRITION AND FORAGE DEVELOPMENT	7/5/2016	7/6/2016	16.0	TECHNICAL	CEBU TECHNOLOGICAL UNIVERSITY - BARILI CAMPUS
	ON THE JOB TRAINING AT ROYAL VANZANTEN BREEDING	5/1/2015	10/27/2015	1056.0	TECHNICAL	SSCEBU (STICHTING STAGIARES CEBU)
(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)		
	COMPUTER SKILLS	N/A		N/A		
	PLANT TISSUE CULTURE	N/A		PHILIPPINE ASSOCIATION OF PLANT TISSUE CULTURE AND BIOTECHNOLOGY		
	PLANT PROPAGATION	N/A		N/A		
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	5/8/2024	

<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <hr/> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">Status of Case/s: _____</p>												
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>												
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>												
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>DR. ROBelyn T. PIAMONTE</td> <td>VISCA, BAYBAY CITY, LEYTE</td> <td>N/A</td> </tr> <tr> <td>DR. VICTOR B. ASIO</td> <td>VISCA, BAYBAY CITY, LEYTE</td> <td>N/A</td> </tr> <tr> <td>DR. CATHERINE C. ARRADAZA</td> <td>VISCA, BAYBAY CITY, LEYTE</td> <td>N/A</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	DR. ROBelyn T. PIAMONTE	VISCA, BAYBAY CITY, LEYTE	N/A	DR. VICTOR B. ASIO	VISCA, BAYBAY CITY, LEYTE	N/A	DR. CATHERINE C. ARRADAZA	VISCA, BAYBAY CITY, LEYTE	N/A
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DR. CATHERINE C. ARRADAZA	VISCA, BAYBAY CITY, LEYTE	N/A											
<p>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.</p>													

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance
Government Issued ID: NATIONAL ID
ID/License/Passport No.: 3920470532571583
Date/Place of Issuance: 07/14/2021/ TOLEDO CITY CEBU



Signature (Sign inside the box)
1/20/2024
Date Accomplished



PHOTO

Right Thumbmark

SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath



