

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	ADINO		
FIRST NAME	JESSA MAE	N/A	
MIDDLE NAME	ACANG		
3. DATE OF BIRTH (mm/dd/yyyy)	06/22/1998	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	TAFT, EASTERN	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:		
7. HEIGHT (m)	1.51	17. RESIDENTIAL ADDRESS	PUROK 4 N/A House/Block/Lot No. Street N/A GABAS Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
8. WEIGHT (kg)	53	ZIP CODE	6521
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	N/A BARLONGAY House/Block/Lot No. Street N/A BURAK Subdivision/Village Barangay TAFT EASTERN SAMAR City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6816
11. PAG-IBIG ID NO.	121237306895	19. TELEPHONE NO.	N/A
12. PHILHEALTH NO.	01-026378280-7	20. MOBILE NO.	0905-685-2061/ 0930-624-0460
13. SSS NO.	34-7973034-8	21. E-MAIL ADDRESS (if any)	adinojessamae@gmail.com
14. TIN NO.	736-360-432		
15. AGENCY EMPLOYEE NO.	N/A		

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	N/A	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	ADINO			
FIRST NAME	JESUS	N/A		
MIDDLE NAME	AMBIDA			
25. MOTHER'S MAIDEN NAME				
SURNAME	ACANG			
FIRST NAME	MARILYN			
MIDDLE NAME	BALAGBIS		(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)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	DR. ALEJANDRO ALBERT ELEMENTARY SCHOOL/ TAFT CENTRAL ELEMENTARY SCHOOL	PRIMARY	2003 2007	2007 2010	Graduated	2010	With Honors
SECONDARY	TAFT NATIONAL HIGH SCHOOL	SECONDARY	2010	2014	Graduated	2014	With Honors
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	EASTERN SAMAR STATE UNIVERSITY VISAYAS STATE UNIVERSITY	Bachelor of Science in Agriculture	2014 2014	2014 2018	Graduated	2018	DOST-SEI Scholar
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	Masters of Science in Plant Pathology	2021	Present	Ongoing	Ongoing	DOST-ASTHRDP

(Continue on separate sheet if necessary)

SIGNATURE		DATE	January 14, 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		
	Operation Jabez (Campus Crusade for Christ) - Hinandangan Island, Biliran, Leyte	03/25/2018	04/01/2018	77.0	Volunteer
	Corporate Social Responsibility - Relief Operations for the Victims of Taal Volcano Eruption	01/22/2020	01/22/2020	8.0	Volunteer
	Corporate Social Responsibility - Medical Operation in Babbalag, Rizal, Kalinga, Mountain Province	12/26/2019	12/28/2019	24.0	Volunteer
	Operation Jabez (Campus Crusade for Christ) - Panchovilla, Sogod, Southern Leyte	04/30/2023	05/03/2023	33.0	Volunteer

(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			
	SKILLS DEVELOPMENT SUMMER PRACTICUM	04/27/2015	06/08/2015	240.0	Technical	VISAYAS STATE UNIVERSITY
	DOST-SEI SUMMER PRACTICUM TRAINING PROGRAM	06/19/2017	07/26/2017	240.0	Technical	DOST-SEI
	OPERATION FOR WEATHER MODIFICATION AND WORKSHOP FOR EXTENSION MANAGEMENT	03/12/2019	03/15/2019	32.00	Technical	SUGAR REGULATORY ADMINISTRATION
	GRASSROOTS LEADERSHIP TRAINING FOR BLOCK FARM LEADERS	06/05/2019	06/07/2019	22.0	Technical	SUGAR REGULATORY ADMINISTRATION
	RETOOLING TRAINING AND INTERFACING RD&E SEMINAR	09/24/2019	09/28/2019	40.0	Technical	SUGAR REGULATORY ADMINISTRATION
	FOOD SAFETY AWARENESS SEMINAR	10/22/2019	10/22/2019	8.0	Technical	SUGAR REGULATORY ADMINISTRATION
	MANAGING GEOSPATIAL AND FIELD DATA USING GEOGRAPHIC INFORMATION SYSTEM ANALYSIS	11/18/2019	11/22/2019	40.0	Technical	SUGAR REGULATORY ADMINISTRATION
	2022 NATIONAL SUMMIT FOR BIODIVERSITY CONSERVATION	04/20/2022	04/20/2022	8.0	Technical	FOUNDATION FOR THE PHILIPPINE ENVIRONMENT
	PLANTATION HERBICIDE RESISTANCE MANAGEMENT WEBINAR	06/09/2022	06/09/2022	2.0	Technical	CROP LIFE PHILIPPINES INC. - HERBICIDE RESISTANCE ACTION COMMITTEE
	NANOBIOTECHNOLOGY APPLICATIONS FOR THE MANAGEMENT OF CROP PESTS AND DISEASES	09/27/2022	09/27/2022	4.0	Technical	NATIONAL CROP PROTECTION CENTER
	REGIONAL CROP BIOTECHNOLOGY SYMPOSIUM	03/16/2023	03/16/2023	4.0	Technical	DA CROP BIOTECHNOLOGY CENTER
	TRAINING WORKSHOP ON PREPARING MANUSCRIPTS FOR PUBLICATION	03/29/2023	03/31/2023	24.0	Technical	VISAYAS STATE UNIVERSITY GRADUATE STUDENTS' SOCIETY AND THE GRADUATE SCHOOL
	CURRENT TRENDS IN PEST MANAGEMENT	12/06/2023	12/06/2023	3.0	Technical	VISAYAS STATE UNIVERSITY - DEPARTMENT OF PEST MANAGEMENT




(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)
	Fungal and bacterial isolation		Certificate of Appreciation as Speaker (Gospel of the Living Christ Youth Fellowship)		Campus Crusade for Christ
	Polymerase chain reaction		Certificate of Appreciation as President SY: 2017-2018 (Student Leaders in Campuses-Campus Crusade for Christ)		Visayas State University Alumni's Association
	Virus DNA extraction				
	Microscope navigation				
	Virus purity check (Spectrophotometer)				
	Gel electrophoresis				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	January 14, 2024
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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 checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details: Finished contract _____</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>												
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>Elvira L. Oclarit</td><td>Baybay City, Leyte</td><td>9052225563</td></tr><tr><td>Adel V. Catuira</td><td>Calamba, Laguna</td><td>9988453140</td></tr><tr><td>Robelyn T. Piamonte</td><td>Baybay City, Leyte</td><td>9171546999</td></tr></table>			NAME	ADDRESS	TEL. NO.	Elvira L. Oclarit	Baybay City, Leyte	9052225563	Adel V. Catuira	Calamba, Laguna	9988453140	Robelyn T. Piamonte	Baybay City, Leyte	9171546999
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Robelyn T. Piamonte	Baybay City, Leyte	9171546999												
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></div> <div>PHOTO</div>												
<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: Passport</div> <div>ID/License/Passport No.: P6001921B</div> <div>Date/Place of Issuance: 12/22/2020 - DFA NorthEast</div>	<div></div> <div>Signature (Sign inside the box)</div> <div>January 14, 2024</div> <div>Date Accomplished</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>														