

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	FALCONE		
FIRST NAME	FELY	NAME EXTENSION (JR., SR)	
MIDDLE NAME	CANETE		
3. DATE OF BIRTH (mm/dd/yyyy)	01/25/1993	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	ORMOC CITY, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	ZONE 1 House/Block/Lot No. Street Subdivision/Village GUADALUPE City/Municipality BARANGAY LEYTE Province
7. HEIGHT (m)	1.52	ZIP CODE	6521
8. WEIGHT (kg)	42	18. PERMANENT ADDRESS	PUROK 2 House/Block/Lot No. Street Subdivision/Village MILAGRO City/Municipality BARANGAY ORMOC LEYTE Province
9. BLOOD TYPE	A+	ZIP CODE	6541
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	N/A	20. MOBILE NO.	09487004608
12. PHILHEALTH NO.	13-025151003-3	21. E-MAIL ADDRESS (if any)	felycanete25@gmail.com
13. SSS NO.	0111-5964420-6		
14. TIN NO.	458-935-641		
15. AGENCY EMPLOYEE NO.	N/A		

II. FAMILY BACKGROUND


22. SPOUSE'S SURNAME	FALCONE		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	JOEL	NAME EXTENSION (JR., SR)	N/A	
MIDDLE NAME	ILUMBA			
OCCUPATION	SEAFARER			
EMPLOYER/BUSINESS NAME	CAREER PHILIPPINES INCORPORATED			
BUSINESS ADDRESS	MAKATI CITY			
TELEPHONE NO.				
24. FATHER'S SURNAME	CANETE			
FIRST NAME	FERNANDO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	CAHAL			
25. MOTHER'S MAIDEN NAME				
SURNAME	ROSALES			
FIRST NAME	ANTONIETA			
MIDDLE NAME	REAL			

(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	MILAGRO ELEMENTARY SCHOOL	PRIMARY EDUCATION	1999	2005		2005	VALE DOKTORAN
SECONDARY	NEW ORMOC CITY NATIONAL HIGH SCHOOL	HIGH SCHOOL	2005	2009		2009	
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	VISAYAS STATE UNIVERSITY	BS in AGRICULTURE	2009	2013		2013	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MS in PLANT PATHOLOGY	2018	2021		2021	DOST

(Continue on separate sheet if necessary)

SIGNATURE		DATE	JULY 6, 2021
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED	
1. Name of the Program	
2. Description of the Program	
3. Dates Attended	
4. Location	
5. Sponsor/Provider	
6. Key Takeaways/Insights	
7. Application to Current Role	
8. Additional Comments	

[illegible]




(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)
• KNOWLEDGE IN OFFICE APPLICATIONS (MICROSOFT WORD, EXCEL, POWERPOINT)	N/A	N/A
• PLANT DISEASE DIAGNOSTICS		
• WEED IDENTIFICATION AND MANAGEMENT		
• PLAYING A GUITAR		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	JULY 6, 2021
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<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> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>DR. LUCIA M. BORINES</td> <td>PDPL, VSU</td> <td>09176576908</td> </tr> <tr> <td>INISA CHRIS P. MESIAS</td> <td>DFST, VSU</td> <td>09564955081</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	DR. LUCIA M. BORINES	PDPL, VSU	09176576908	INISA CHRIS P. MESIAS	DFST, VSU	09564955081			
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INISA CHRIS P. MESIAS	DFST, VSU	09564955081											
<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>													
<p>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</p> <p>PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: <u>PRC</u></p> <p>ID/License/Passport No.: <u>0016908</u></p> <p>Date/Place of Issuance: <u>09/04/2019</u> <u>ORMOC CITY</u></p>	<p style="text-align: center;">  Signature (Sign inside the box) <u>JULY 6, 2021</u> Date Accomplished </p>	<p style="text-align: center;">  FALCONE, FELY C. PHOTO </p> <p style="text-align: center;">  Right Thumbmark </p>											
<p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; width: 200px; height: 50px; margin: 10px auto;"></div> <p style="text-align: center;">Person Administering Oath</p>													