

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	GALENZOGA		
FIRST NAME	FLORA MAE		
MIDDLE NAME	ANGTUD		
3. DATE OF BIRTH (mm/dd/yyyy)	5/25/1982	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	CEBU CITY	If holder of dual citizenship, please indicate the details.	Philippines
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:		
7. HEIGHT (m)	160022	17. RESIDENTIAL ADDRESS	299 R. MAGSAYSAY ST. House/Block/Lot No. Street Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province 6521
8. WEIGHT (kg)	53	ZIP CODE	
9. BLOOD TYPE	AB+	18. PERMANENT ADDRESS	299 R. MAGSAYSAY ST. House/Block/Lot No. Street Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province 6521
10. GSIS ID NO.		ZIP CODE	
11. PAG-IBIG ID NO.			
12. PHILHEALTH NO.			
13. SSS NO.	0619450795	19. TELEPHONE NO.	
14. TIN NO.	232 000 111	20. MOBILE NO.	09297136524
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	flora.galenzoga@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	GALENZOGA		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	MARCIANO JOSE	NAME EXTENSION (JR., SR)	CARLOS GABRIEL ANGTUD GALENZOGA	05/15/2011
MIDDLE NAME	VELOSO			
OCCUPATION	FARMER			
EMPLOYER/BUSINESS NAME	G'S FARM			
BUSINESS ADDRESS	BRNGY. MAITUM BAYBAY CITY			
TELEPHONE NO.				
24. FATHER'S SURNAME	ANGTUD			
FIRST NAME	LUCIANO	NAME EXTENSION (JR., SR) SR		
MIDDLE NAME	LUTAO			
25. MOTHER'S MAIDEN NAME				
SURNAME	TANJAY			
FIRST NAME	DEMETRIA			
MIDDLE NAME	POCOT		(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	LILLOAN CENTRAL SCHOOL		6/3/1989	3/24/1995		1995	
SECONDARY	(formerly) HOLY CHILD SCHOOL LA CONSOLACION COLLEGE (now)		6/8/1996	3/30/2000		2000	
VOCATIONAL / TRADE COURSE							
COLLEGE	UNIVERSITY OF SAN JOSE RECOLETOS	BACHELOR OF ARTS	6/5/2000	3/16/2003		2000	
	UNIVERSITY OF VISAYAS	DIPLOMA IN PROFESSIONAL EDUCATION	11/16/2006	3/16/2006		2006	
GRADUATE STUDIES	PHILIPPINE LAW SCHOOL	BACHELOR OF LAWS	6/11/2007	3/22/2012		2012	
	UNIVERSITY OF VISAYAS	MASTERS IN PUBLIC MANAGEMENT	11/10/2003	3/23/2007		2007	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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IV. CIVIL SERVICE ELIGIBILITY

27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	LET (LICENSURE EXAMINATION FOR TEACHER)	77.08	8/27/2006	CEBU CITY	0930587	10/7/2006
	CS PROFESSIONAL	81.08	12/16/2003	CEBU CITY	031619WE	#####

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

<i>(Continue on separate sheet if necessary)</i>							
SIGNATURE				DATE			

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		
	ROTC CORPS VCU	9/8/2012	PRESENT		ROTC - ADVISER OF SPONSORS
	BROTHERHOOD OF CHRISTIAN BUSINESSMEN AND PROFESSIONALS	3/19/2012	PRESENT		MEMBER

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[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)
SPEAKING ENGAGEMENT OR AS A RESOURCE SPEAKER		BROTHERHOOD OF CHRISTIAN BUSINESSMAN AND PROFESSIONAL
WRITING SHORT STORIES, ESSAYS AND POEMS		
HOSTING, ACTING AND MODELING		

(Continue on separate sheet if necessary)

<i>(Continue on separate sheet if needed.)</i>			
SIGNATURE		DATE	

<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 checked="" type="checkbox"/> YES <input 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: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>DR. SEREGENA RUTH L. MARTINEZ</td> <td>DLABS VSU VISCA, BAYBAY CITY</td> <td>0918 547 5499</td> </tr> <tr> <td>PROF. MANOLO B. LORETO</td> <td>STUDENT AFFAIRS OFFICE VSU VISCA, BAYBAY CITY</td> <td>053 653 7076</td> </tr> <tr> <td>MR. GUIRALDO C. FERNANDEZ JR.</td> <td>DLABS VSU VISCA, BAYBAY CITY</td> <td>0917 654 0264</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	DR. SEREGENA RUTH L. MARTINEZ	DLABS VSU VISCA, BAYBAY CITY	0918 547 5499	PROF. MANOLO B. LORETO	STUDENT AFFAIRS OFFICE VSU VISCA, BAYBAY CITY	053 653 7076	MR. GUIRALDO C. FERNANDEZ JR.	DLABS VSU VISCA, BAYBAY CITY	0917 654 0264	
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<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>														
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td colspan="2">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID:</td> <td>PRC</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>0930587</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>12 / 14 / 2006</td> </tr> </table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)		PLEASE INDICATE ID Number and Date of Issuance		Government Issued ID:	PRC	ID/License/Passport No.:	0930587	Date/Place of Issuance:	12 / 14 / 2006	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 60px; vertical-align: bottom;">Signature (Sign inside the box)</td> </tr> <tr> <td style="text-align: center;">02 / 22 / 2016</td> </tr> <tr> <td style="text-align: center;">Date Accomplished</td> </tr> </table>	Signature (Sign inside the box)	02 / 22 / 2016	Date Accomplished
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<p style="text-align: center;">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: 300px; margin: 10px auto; padding: 10px; text-align: center;"> <p>ATTY. RYSAN C. GUINOCOR</p> <p>Person Administering Oath</p> </div>														

ID picture taken within the last 6 months
3.5 cm. X 4.5 cm
(passport size)

With full and handwritten name tag and signature over printed name

Computer generated or photocopied picture is not acceptable

PHOTO

Right Thumbmark