

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	ALIBIO			
FIRST NAME	RODGLEN	NAME EXTENSION (JR., SR)		
MIDDLE NAME	PLAIDA			
3. DATE OF BIRTH (mm/dd/yyyy)	JANUARY 29, 2000	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	QUEZON CITY, MM	If holder of dual citizenship, please indicate the details.		
5. SEX	<input checked="" type="checkbox"/> Male <input 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)	1.69	17. RESIDENTIAL ADDRESS	REAL ST.	
8. WEIGHT (kg)	51		House/Block/Lot No.	Street
9. BLOOD TYPE	N/A		PUROK BAYABAS	SABANG BAO
10. GSIS ID NO.	N/A		Subdivision/Village	Barangay
11. PAG-IBIG ID NO.	1212-9405-9315	18. PERMANENT ADDRESS	ORMOC CITY	LEYTE
12. PHILHEALTH NO.	13-250715256-6		City/Municipality	Province
13. SSS NO.	35-1624774-8			
14. TIN NO.	769-635-919-00000			
15. AGENCY EMPLOYEE NO.		19. TELEPHONE NO.	N/A	
		20. MOBILE NO.	09467442169	
		21. E-MAIL ADDRESS (if any)	alibio.glen01@gmail.com	

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)		
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	ALIBIO			
FIRST NAME	RODRIGO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	DILLERA			
25. MOTHER'S MAIDEN NAME				
SURNAME	PLAIDA			
FIRST NAME	GLENDA			
MIDDLE NAME	BEJIMINO		(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	SABANG BAO ELEMENTARY SCHOOL	PRIMARY	06/0/2007	03/0/2013		2013	HONORS STUDENT
SECONDARY	RUSTICO CAPIHI SR. MEMORIAL NATIONAL HIGH SCHOOL	SECONDARY	06/0/13	03/0/2019		2019	WITH HIGH HONORS
VOCATIONAL / TRADE COURSE							
COLLEGE	VISAYAS STATE UNIVERSITY	BS in Agriculture Major in Plant Protection specialize in Weed Science	08/0/2019	08/0/2024		2024	
GRADUATE STUDIES							

(Continue on separate sheet if necessary)


SIGNATURE		DATE	July 21, 2024
-----------	---	------	---------------

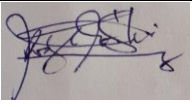
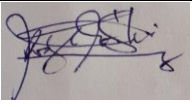
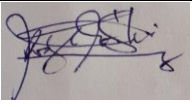



[illegible]

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

[illegible]

SIGNATURE		DATE	JULY 21, 2024
-----------	---	------	---------------

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			
	NSTP CWTS Team Industry	08/0/2019	05/0/2020		PRESIDENT	
	VSU NSTP CWTS	08/0/2019	05/0/2020		BOARD OF TRUSTEES	
	VSU PLANT PROTECTION MAJOR'S ASSOCIATION	08/0/2024	05/0/2024		SECRETARY	
	VSU ASSOCIATION OF PLANT BREEDING MAJOR	08/02019	05/0/2021		TREASURER	
(Continue on separate sheet if necessary)						
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED						
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			
	WEBINAR ON FUNGAL ENDOPHYTES: THE FUNGI WITHIN PLANTS	09/0/2021	09/0/2021	4.0	ACADEMIC	UNIVERSITY OF STO. TOMAS
	BIOCONTROL OF NEMATODES USING FUNGI: THE CASE OF THE PINEWOOD NEMATODE	09/0/2023	09/0/2023	4.0	ACADEMIC	DE LA SALLE UNIVERSITY
	OCCURRENCE AND MOLECULAR CGARACTERIZATION USING DNA SEQUINCING OF ABACA BUNCHY TOP VIRUSES IN SOUTH COTABATO	10/0/2023	10/0/2023	4.0	ACADEMIC	VISAYAS STATE UNIVERSITY
	CURRENT TRENDS IN PEST MANAGEMNT	11/0/2023	11/0/2023	4.0	ACADEMIC	MINDANAO STATE UNIVERSITY
	A FORUM ON METABOLIC ENGINEERING, CHRONOBIOLOGY AND NANOTECH APPLICATION IN AGRICULTURE	03/0/2024	03/0/2024	4.0	ACADEMIC	VSU DPM
	240 ON-THE-JOB TRAINING	02/0/2024	040/2024	4.0	TRAINING	VSU PDDL
	APPLICATION RECHNIQUE ON HERBICIDES	07/0/2024	07/0/2027	4.0	TECHNICAL	CROP LIFE PH. INC.
	EMERGING PEST, BIOCONTROL AND MECHANISM OF INSECTICIDE AND DISEASE RESISTANCE	07/0/2024	07/0/2024	4.0	ACADEMIC	VSU DPM
(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)	
	SINGING		N/A		VSU PARACLETE	
(Continue on separate sheet if necessary)						
SIGNATURE				DATE		JULY 21, 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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>JOY ADELIN N. CADALIN</td> <td>VSU PDDL</td> <td>joy.cadalin@vsu.edu.ph</td> </tr> <tr> <td>JUSTINE BENNETTE H. MILLADO</td> <td>VSU DPM</td> <td></td> </tr> <tr> <td>ROWENA R. ROMO</td> <td>ORMOC CITY</td> <td>9606568475</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	JOY ADELIN N. CADALIN	VSU PDDL	joy.cadalin@vsu.edu.ph	JUSTINE BENNETTE H. MILLADO	VSU DPM		ROWENA R. ROMO	ORMOC CITY	9606568475
NAME	ADDRESS	TEL. NO.											
JOY ADELIN N. CADALIN	VSU PDDL	joy.cadalin@vsu.edu.ph											
JUSTINE BENNETTE H. MILLADO	VSU DPM												
ROWENA R. ROMO	ORMOC CITY	9606568475											
<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>TIN ID</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>769-635-919-00000</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>05/26/2022</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:	TIN ID	ID/License/Passport No.:	769-635-919-00000	Date/Place of Issuance:	05/26/2022	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">  Signature (Sign inside the box) </td> </tr> <tr> <td style="text-align: center;">Date Accomplished</td> </tr> </table>	 Signature (Sign inside the box)	Date Accomplished
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)													
PLEASE INDICATE ID Number and Date of Issuance													
Government Issued ID:	TIN ID												
ID/License/Passport No.:	769-635-919-00000												
Date/Place of Issuance:	05/26/2022												
 Signature (Sign inside the box)													
Date Accomplished													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; height: 100px; vertical-align: bottom; text-align: center;"> SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above. <div style="border: 1px solid black; width: 100%; height: 40px; margin-top: 10px;"></div> Person Administering Oath </td> <td style="width: 50%; text-align: center; vertical-align: bottom;">  PHOTO </td> </tr> </table>		SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above. <div style="border: 1px solid black; width: 100%; height: 40px; margin-top: 10px;"></div> Person Administering Oath	 PHOTO										
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above. <div style="border: 1px solid black; width: 100%; height: 40px; margin-top: 10px;"></div> Person Administering Oath	 PHOTO												