

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	CAÑEZO		
FIRST NAME	XAVIERY RIC	NAME EXTENSION (JR., SR)	
MIDDLE NAME	GALLOS		
3. DATE OF BIRTH (mm/dd/yyyy)	01/14/2000	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	ORMOC CITY	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)	1.68	17. RESIDENTIAL ADDRESS	521 PUROK TOSA House/Block/Lot No. Street
8. WEIGHT (kg)	70		TINAG-AN Subdivision/Village Barangay
9. BLOOD TYPE	O		ALBUERA LEYTE City/Municipality Province
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	121309666187		
12. PHILHEALTH NO.	13-253399957-7	18. PERMANENT ADDRESS	521 PUROK TOSA House/Block/Lot No. Street
13. SSS NO.	N/A		19. TELEPHONE NO.
14. TIN NO.	617-494-506-0000	20. MOBILE NO.	0930 326 5451 TNT
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	xavieryricgalloscañezo@gmail.com
		ZIP CODE	6542

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			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	CAÑEZO			
FIRST NAME	RICARDO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	MIDERA			
25. MOTHER'S MAIDEN NAME	ARMIDA DELACRUZ GALLOS			
SURNAME	GALLOS			
FIRST NAME	ARMIDA			
MIDDLE NAME	DELACRUZ		(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	TINAG-AN ELEMENTARY SCHOOL	N/A	2006	2012	N/A	2012	N/A
SECONDARY	DAMULAAAN NATIONAL HIGH SCHOOL	N/A	2012	2018	N/A	2018	LEADERSHIP AWARD
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY EDUCATION	2018	2022	174	2022	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)			
SIGNATURE	Type text here	DATE	June 18, 2024

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		
	Licensure Examination For Teachers	87.00	September 24, 2023	Leyte National High School	N/A	N/A		
(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.								
28.	INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
	From	To						
	January 15, 2024-	Present	PART-TIME INSTRUCTOR	DEPARTMENT OF PHILOSOPHY & SOCIAL SCIENCES	N/A	N/A	PART-TIME	Y
	August 16, 2023-	December 2023	PART-TIME INSTRUCTOR	DEPARTMENT OF PHILOSOPHY & SOCIAL SCIENCES	N/A	N/A	PART-TIME	Y
	February 15, 2023-	June 23, 2023	PART-TIME INSTRUCTOR	DEPARTMENT OF LIBERAL ARTS & BEHAVIORAL SCIENCES	N/A	N/A	PART-TIME	Y
	September 28, 2022-	February 1, 2023	PART-TIME INSTRUCTOR	DEPARTMENT OF LIBERAL ARTS & BEHAVIORAL SCIENCES	N/A	N/A	PART-TIME	Y
(Continue on separate sheet if necessary)								
SIGNATURE					DATE	June 18, 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		
	VISAYAS STATE UNIVERSITY INTERACT SOCIETY	N/A	N/A	N/A	PUBLIC INFORMATION OFFICER

(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			
	DIGITAL STORY TELLING FOR PRIMARY LEVEL FOCUSING ON FARMING	11-03-2023	11-04-2023	16 HOURS	FOUNDATIONAL	VISAYAS STATE UNIVERSITY MAIN CAMPUS
	EXPLORATIONS ON RESEARCH AND THE LOCALCULTURE & ARTS	06-18-2023	06-19-2023	16 HOURS	FOUNDATIONAL	VISAYAS STATE UNIVERSITY MAIN CAMPUS
	INSTRUCTIONAL RESOURCES IN REMOTE LEARNING	11-19-2021	11-19-2021	7 HOURS	FOUNDATIONAL	VISAYAS STATE UNIVERSITY COLLEGE OF EDUCATION
	ASSESSMENT STRATEGIES IN FLEXIBLE LEARNING	10-14-2021	10-14-2021	7 HOURS	FOUNDATIONAL	VISAYAS STATE UNIVERSITY COLLEGE OF EDUCATION
	TEACHING IN THE NEW NORMAL	9-24-2021	9-24-2021	7 HOURS	FOUNDATIONAL	VISAYAS STATE UNIVERSITY COLLEGE OF EDUCATION

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	LISTENING TO MUSIC	N/A		VISAYAS STATE UNIVERSITY INTERACT SOCIETY
	WATCHING DOCUMENTARY SHOWS	N/A		
	TRAVEL	N/A		
	READING BOOKS	N/A		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	JUNE 18, 2024
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34.

Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person who has immediate supervision over you in the Bureau or Department where you will be appointed,

a. within the third degree?

b. within the fourth degree (for Local Government Unit - Career Employees)?

☐ YES

☒ NO

☐ YES

☒ NO

If YES, give details:

35.

a. Have you ever been found guilty of any administrative offense?

☐ YES

☒ NO

If YES, give details:

b. Have you been criminally charged before any court?

☐ YES

☒ NO

If YES, give details:

Date Filed:

Status of Case/s:

36.

Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?

☐ YES

☒ NO

If YES, give details:

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?

☐ YES

☒ NO

If YES, give details:

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?

☐ YES

☒ NO

If YES, give details:

☐ YES

☒ NO

If YES, give details:

39.

Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES

☒ NO

If YES, give details (country):

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

a. Are you a member of any indigenous group?

b. Are you a person with disability?

c. Are you a solo parent?

☐ YES

☒ NO

If YES, please specify:

☐ YES

☒ NO

If YES, please specify ID No:

☐ YES

☒ NO

If YES, please specify ID No:

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
JAY C. BANSALE	VISAYAS STATE UNIVERSITY MAIN CAMPUS	N/A

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

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.

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID:

ID/License/Passport No.:

Date/Place of Issuance:

Signature (Sign inside the box)

JANUARY 15, 2024

Date Accomplished

Right Thumbmark

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

Person Administering Oath

