

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	ANDUYAN		
FIRST NAME	CAROLINE	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	BERRI		
3. DATE OF BIRTH (mm/dd/yyyy)	4/4/1984	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citizenship, please indicate the details	<input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		Pls. indicate country:
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	228 TRES MARTIRES ST
7. HEIGHT (m)	1.55 m	ZIP CODE	ZONE 13 BAYBAY CITY
8. WEIGHT (kg)	73 kg		LEYTE
9. BLOOD TYPE	AB+		
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	1210-6728-7283	18. PERMANENT ADDRESS	228 TRES MARTIRES ST.
12. PHILHEALTH NO.	07-050608686-6	ZIP CODE	ZONE 13 BAYBAY CITY
13. SSS NO.	02-2253324-5		LEYTE
14. TIN NO.	291-207-604	19. TELEPHONE NO.	N/A
15. AGENCY EMPLOYEE NO.		20. MOBILE NO.	09196516518 / 09267984713
		21. E-MAIL ADDRESS (if any)	caroline.anduyan@vsu.edu.ph

II. FAMILY BACKGROUND

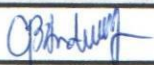
22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A	RAFAELA B. ANDUYAN	2/19/2006
MIDDLE NAME	N/A		ADRIAN A. JOSE	7/10/2010
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	Visayas State University			
BUSINESS ADDRESS	Vsu, Baybay City, Leyte			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	ANDUYAN			
FIRST NAME	RAMON	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	SESCON			
25. MOTHER'S MAIDEN NAME				
SURNAME	BERRI			
FIRST NAME	LOLITA			
MIDDLE NAME	APOSTOL			

(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	BAYBAY NORTH CENTRAL SCHOOL	Primary Education	6/1/1991	4/1/1997	graduated	1997	3rd Honorable Mention\
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	High School	6/1/1997	4/1/2001	graduated	2001	1st Honorable mention
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	HOLY ANGEL UNIVERSITY	BACHELOR OF SCIENCE IN BUSINESS ADMINISTRATION MAJOR IN FINANCE & MANAGEMENT ACCOUNTING	6/1/2001	4/1/2005	graduated	2005	
	HOLY ANGEL UNIVERSITY	ASSOCIATE IN OFFICE ADMINISTRATION	6/1/2006	4/1/2008	graduated	2008	
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	5/19/2022
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IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(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]

(Continue on separate sheet if necessary)

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29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
N/A		N/A	N/A	N/A	N/A


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










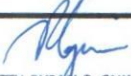
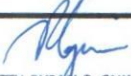
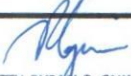
[illegible]

(Continue on separate sheet if necessary)

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	COMPUTER LITERATE				PHILIPPINE ASSOCIATION OF STUDENTS IN OFFICE ADMINISTRATION
	STENOGRAPHY				
	KEYBOARDING/TYPING				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	5/19/2022
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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)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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 items: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)													
<table><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>ATTY. JEROME T. PARAS</td><td>ANGELES CITY, PAMPANGA</td><td>9172549001</td></tr><tr><td>ATTY. ELAIAS T. TIMBOL</td><td>ANGELES CITY, PAMPANGA</td><td>9175293812</td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	ATTY. JEROME T. PARAS	ANGELES CITY, PAMPANGA	9172549001	ATTY. ELAIAS T. TIMBOL	ANGELES CITY, PAMPANGA	9175293812			
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ATTY. ELAIAS T. TIMBOL	ANGELES CITY, PAMPANGA	9175293812											
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.													
<table><tr><td>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID: Driver's License</td></tr><tr><td>ID/License/Passport No.: H12-20-002156</td></tr><tr><td>Date/Place of Issuance: Baybay City, Leyte</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: Driver's License	ID/License/Passport No.: H12-20-002156	Date/Place of Issuance: Baybay City, Leyte	<table><tr><td> Signature (Sign inside the box)</td></tr><tr><td>19/2022 Date Accomplished</td></tr></table>	 Signature (Sign inside the box)	19/2022 Date Accomplished						
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SUBSCRIBED AND SWORN to before me this 19 MAY 2022 , affiant exhibiting his/her validly issued government ID as indicated above.													
<table><tr><td> ATTY. RYSAN C. GUINOCOR VSU Chief Legal Officer</td></tr><tr><td>Person Administering Oath</td></tr></table>		 ATTY. RYSAN C. GUINOCOR VSU Chief Legal Officer	Person Administering Oath										
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