

# PERSONAL DATA SHEET

**WARNING:** Any misinterpretation 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	CAPACAO		
FIRST NAME	RODA	NAME EXTENSION (JR., SR) NA	
MIDDLE NAME	GONATO		
3. DATE OF BIRTH (mm/dd/yyyy)	7/13/1993	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input checked="" type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	TABGAS ALBUERA LEYTE	If holder of dual citizenship, NA	Philippines ▼
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	17. RESIDENTIAL ADDRESS	NA NA Subdivision/Village BAYBAY CITY LEYTE City/Municipality Province 6521
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:	18. PERMANENT ADDRESS	NA NA House/Block/Lot No. Street NA MARCOS Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province 6521
7. HEIGHT (m)	5'2FT	19. TELEPHONE NO.	NA
8. WEIGHT (kg)	61KG	20. MOBILE NO.	09456038835
9. BLOOD TYPE	NA	21. E-MAIL ADDRESS (if any)	<a href="mailto:capacaoroda@gmail.com">capacaoroda@gmail.com</a>
10. GSIS ID NO.	NA		
11. PAG-IBIG ID NO.	1212-805-851-79		
12. PHILHEALTH NO.	21-025350978-8		
13. SSS NO.	02-3948470-1		
14. TIN NO.	479-324-870		
15. AGENCY EMPLOYEE NO.			

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	NA	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NA	NAME EXTENSION (JR., SR)	NA
MIDDLE NAME	NA	NAME EXTENSION (JR., SR)	NA
OCCUPATION	NA		
EMPLOYER/BUSINESS NAME	NA		
BUSINESS ADDRESS	NA		
TELEPHONE NO.	NA		
24. FATHER'S SURNAME	CAPACAO		
FIRST NAME	MAXIMO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	MISPEROS		
25. MOTHER'S MAIDEN NAME			
SURNAME	GONATO		
FIRST NAME	DIVINA		
MIDDLE NAME	BAGARINAO		

(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	PANGASUGAN ELEMENTARY SCHOOL	ELEMENTARY DIPLOMA	2001	2007	NA	2007	3RD HONOURABLE MENTION
SECONDARY	ALTERNATIVE LEARNING SYSTEM	HIGH SCHOOL DIPLOMA	2007	2010	NA	2010	6TH PLACE
VOCATIONAL / TRADE COURSE	NA	NA	NA	NA	NA	NA	NA
COLLEGE	VISAYAS STATE UNIVERSITY	CERTIFICATE OF SCIENCE IN AGRICULTURE	2011	2013	NA	2015	HIGH HONOR/ COLLEGE SCHOLAR
		BACHELOR OF SCIENCE IN AGRICULTURE	2011	2015	NA	2015	CUM LAUDE/ GAWAD PATNUBAY SCHOLAR
GRADUATE STUDIES	UNIVERSITY OF THE PHILIPPINES LOS BAÑOS	MS PLANT PATHOLOGY	Jan. 2018	PRESENT	24 UNITS	NA	DOST - ASTHRDP

(Continue on separate sheet if necessary)

SIGNATURE		DATE	January 16, 2024
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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	LICENSE (if applicable)	
				NUMBER	Date of Validity
	HONOR GRADUATE ELIGIBILITY (PD 907)	NA	NA	100108150381	NA
	AGRICULTURIST LICENSURE EXAMINATION (RA1080)	NA	6/22/2015	0022430	7/13/2026

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

[illegible]

<b>SIGNATURE</b>	<i>R Capacao</i>	<b>DATE</b>	January 16, 2024	
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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		
	HAYAG FAMILY DEVELOPMENT CENTER WORKING WITH CHILD FUND - ORMOC CITY	4/24/2013	4/26/2013	24.0	SWIMMING INSTRUCTOR FOR THE SWIM CAMP/DISASTER PREPAREDNESS TRAINING FOR CHILDREN AND YOUTH
	HAYAG FAMILY DEVELOPMENT CENTER IN PARTNERSHIP WITH PEACE CORPS PHILIPPINES - ORMOC CITY	6/22/2013	6/22/2013	8.0	TECHNICAL ASSISTANCE DURING THE OPEN WATER SAFETY TRAINING FOR CHILDREN AND YOUTH

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

	INCLUSIVE DATES OF		Turn-off	
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[illegible]

#### VIII. OTHER INFORMATION


31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	READING SCIENTIFIC REPORTS		PMCP-BAYER CROP SCIENCE BEST UNDERGRADUATE THESIS AWARD IN WEED SCIENCE		INTERNATIONAL SOCIETY FOR SOUTHEAST ASIAN AGRICULTURAL SCIENCE, INC. (ISSAAS) - PHILIPPINE CHAPTER
	WRITING RESEARCH PAPERS		1ST PLACE FOR THE ONGOING RESEARCH PAPER DURING THE CY 2023 RDE CLUSTER REVIEW AT VISAYAS STATE UNIVERSITY		PHILIPPINE ASSOCIATION OF AGRICULTURIST
	EXPLORING SCIENTIFIC IDEAS				
	PLAYING SPORTS				

<b>SIGNATURE</b>	<i>R Caprao</i>	<b>DATE</b>	January 16, 2024
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January 16, 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 checked="" type="checkbox"/> YES      <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Finished contract</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>TERESITA U. DALISAY</td> <td>UNIVERSITY OF THE PHILIPPINES LOS BAÑOS</td> <td>9952203275</td> </tr> <tr> <td>LUALHATI M. NORIEL</td> <td>VISCA, BAYBAY CITY, LEYTE</td> <td>9187755627</td> </tr> <tr> <td>ROBELYN T. PIAMONTE</td> <td>VISCA, BAYBAY CITY, LEYTE</td> <td>9171546999</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	TERESITA U. DALISAY	UNIVERSITY OF THE PHILIPPINES LOS BAÑOS	9952203275	LUALHATI M. NORIEL	VISCA, BAYBAY CITY, LEYTE	9187755627	ROBELYN T. PIAMONTE	VISCA, BAYBAY CITY, LEYTE	9171546999		
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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>															
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<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <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; height: 60px; width: 100%; margin-top: 10px;"></div> <div style="border: 1px solid black; padding: 5px; text-align: center; margin-top: 5px;">             Person Administering Oath           </div> </div> <div style="width: 35%; text-align: center;">  <p>PHOTO</p> <div style="border: 1px solid black; height: 100px; width: 100%; margin-top: 10px;"></div> <p>Right Thumbmark</p> </div> </div>															