

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	CAINTIC		
FIRST NAME	PAULINE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	SALIGUE		
3. DATE OF BIRTH (mm/dd/yyyy)	07/12/1970	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	Maasin City	If holder of dual citizenship, please indicate the details.	
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)	1.5 m	17. RESIDENTIAL ADDRESS	
8. WEIGHT (kg)	60 kg	ZIP CODE	House/Block/Lot No. Street
9. BLOOD TYPE	"A"		Zone 6 Guadalupe
10. GSIS ID NO.	70071201471		Subdivision/Village Barangay
11. PAG-IBIG ID NO.	1700-0027-2707		Baybay City Leyte
12. PHILHEALTH NO.	13-000014337-6		City/Municipality Province
13. SSS NO.	N/A	18. PERMANENT ADDRESS	
14. TIN NO.	161-560-784	ZIP CODE	House/Block/Lot No. Street
15. AGENCY EMPLOYEE NO.	V00172		Zone 6 Guadalupe
			Subdivision/Village Barangay
			Baybay City Leyte
			City/Municipality Province
		19. TELEPHONE NO.	6521
		20. MOBILE NO.	563-8582
		21. E-MAIL ADDRESS (if any)	09976672006
			caintic.pauline@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Caintic		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Wenito	NAME EXTENSION (JR., SR)	Caintic, Paula Wayne S.	10/13/2002
MIDDLE NAME	Alba		Caintic, Wayne Pocholo S.	05/17/2004
OCCUPATION	Self-employed			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	09207077230			
24. FATHER'S SURNAME	Saligue			
FIRST NAME	Nemesio	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Machado			
25. MOTHER'S MAIDEN NAME				
SURNAME	Castañares			
FIRST NAME	Isabelita			
MIDDLE NAME	Abocejo			
(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	San Rafael Elementary School, Maasin So. Leyte	Primary Education	1977	1983		1983	N/A
SECONDARY	San Rafael Brgy High School, Maasin So. Leyte	High School	1983	1987		1987	N/A
COLLEGE	Visayays State College of Agriculture	BS Agriculture	1987	1991		1991	College Scholar
GRADUATE STUDIES	Visayas State University	Masters of Management	2013	2017		2017	N/A
	Masaryk University, Czech Republic	Master Exchange	2015	2016	21 ECTS		Erasmus Mundus
	University of San Carlos	PhD in Business Administration	2019	2022		2023	VSU Fellowship

(Continue on separate sheet if necessary)

SIGNATURE		DATE	June 30, 2023
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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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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		
	VSU Credit Cooperative	2017	2019	2 hrs/month	Member, Education Commitee
	VSU Credit Cooperative	2022	present	36 hrs	Member, Election Committee
	Kabalikat Civicom	2019	present	as the need arises	Member

(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			
	Training-Workshop on the Global Strategies in Journal, Author, and Article Citation <input type="checkbox"/>	03/29/2023	03/31/2023	24 hrs	Technical	Asian Society of Teachers for Research
	Training-Workshop on Selected Quantitative Methods for Impact Evaluation	04/03/2023	04/05/2023	24 hrs	Technical	ViCARP, VSU
	Training Course on Research and Development (R&D) Project Implementation Management (RP) <input type="checkbox"/>	04/10/2019	04/12/2019	24 hrs	Managerial	ViCARP and DOST-8
	Training Course on Research and Development (R&D) Project Implementation Management	09/04/2018	09/07/2018	28 hrs	Managerial	Visayas Consortium for Agriculture and Resources Program (ViCARP) and Philippine Association of Research Managers, Inc. (PHILARM)
	NCIII Certification: Agricultural Crops Production	05/03/2018	05/18/2018	40 hrs	Technical	Agricultural Training Institute (ATI), Region 8
	Training on Event Management	03/22/2018	03/23/2018	16 hrs	Managerial	Philippine Council for Agriculture, Aquatic and Natural Resources Research and Development (PCAARRD)
	How to Get key Decision Makers to Say Yes to your Project Ideas: A Training Course for Project Implementers	07/18/2017	07/20/2017	24 hrs	Managerial	PCAARRD and WESVAARDEC
	Seminar/Workshop on The Philippine Bidding Documents	06/28/2017	06/30/2017	24 hrs	Technical	Association of Govt Internal Auditors, Inc
	Full Length Training on Government Procurement Reform Act and its Revised IRR	05/03/2017	05/05/2017	24 hrs	Techncial	Department of Budget & Mgt (DBM) and REALBO
	Full Awareness Training Course ISO 9001:2015	01/26/2017	01/27/2017	16 hrs	Techncial	AJA Registrars Inc
	IP Management Training cum Writeshop on Patent Claims and Specifications Drafting	11/21/2016	11/22/2016	16 hrs	Managerial	Visayas Consortium for Agriculture and Resources Program (ViCARP)
	Training Workshop on Writing and Reviewing Research Papers for Peer Reviewed Publications	10/03/2016	10/05/2016	24 hrs	Techncial	Visayas Consortium for Agriculture and Resources Program (ViCARP)
	Seminar/Workshop on Financial Management	09/15/2016	09/16/2016	16 hrs	Technical	Philippine Council for Agriculture, Aquatic and Natural Resources Research and Development (PCAARRD)





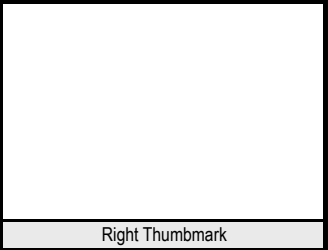

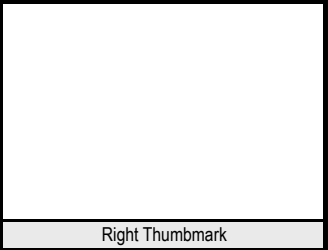

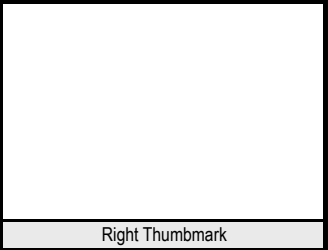



(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Coordination & facilitation		N/A		VSU Credit Cooperative
	Word Processing		N/A		Kabalikat Civicom
					VSU Faculty Association
					PhilARM

(Continue on separate sheet if necessary)

SIGNATURE		DATE	June 30, 2023
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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)?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>												
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?	<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)													
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>Dr. Ma. Juliet C. Ceniza</td><td>VSU, Visca, Baybay City, Leyte</td><td>09173095016</td></tr><tr><td>Dr. Jose L. Bacusmo</td><td>Baybay City, Leyte</td><td>09283496536</td></tr><tr><td>Ms. Hazel Grace T. Taganas</td><td>ATI, Visca, Baybay City, Leyte</td><td>09178628433</td></tr></table>		NAME	ADDRESS	TEL. NO.	Dr. Ma. Juliet C. Ceniza	VSU, Visca, Baybay City, Leyte	09173095016	Dr. Jose L. Bacusmo	Baybay City, Leyte	09283496536	Ms. Hazel Grace T. Taganas	ATI, Visca, Baybay City, Leyte	09178628433
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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: GSIS</td></tr><tr><td>ID/License/Passport No.: 70071201471</td></tr><tr><td>Date/Place of Issuance:</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: GSIS	ID/License/Passport No.: 70071201471	Date/Place of Issuance:	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>June 30, 2023</td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	June 30, 2023	Date Accomplished				
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SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.													
<table><tr><td></td></tr><tr><td>Person Administering Oath</td></tr></table>			Person Administering Oath										
													
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