

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	Loreto		
FIRST NAME	Mervyn	NAME EXTENSION (JR., SR)	
MIDDLE NAME	Posas		
3. DATE OF BIRTH (mm/dd/yyyy)	03/03/1983	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	Baybay, Leyte	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input 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)	1.64	17. RESIDENTIAL ADDRESS	Apt 35 Kilbourne House/Block/Lot No. Street VSU Visca Subdivision/Village Barangay Baybay Leyte City/Municipality Province
8. WEIGHT (kg)	95	ZIP CODE	6521
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS	Apt 35 Kilbourne House/Block/Lot No. Street VSU Visca Baybay Leyte City/Municipality Province
10. GSIS ID NO.		ZIP CODE	6521
11. PAG-IBIG ID NO.	121096077905		
12. PHILHEALTH NO.	12-050706310-7		
13. SSS NO.		19. TELEPHONE NO.	
14. TIN NO.	261-780-319	20. MOBILE NO.	09073737617
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	mervyn.loreto@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	SINOGAYA		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	FAITH PRINCESS	NAME EXTENSION (JR., SR)	KLEDS HOPE S. LORETO	10/20/2017
MIDDLE NAME	PECASALES			
OCCUPATION	Executive Assistant			
EMPLOYER/BUSINESS NAME	DSWD RF08			
BUSINESS ADDRESS	Palo, Leyte			
TELEPHONE NO.				
24. FATHER'S SURNAME	LORETO			
FIRST NAME	ALAN	NAME EXTENSION (JR., SR)		
MIDDLE NAME	BACUSMO			
25. MOTHER'S MAIDEN NAME				
SURNAME	POSAS			
FIRST NAME	MA.THERESA			
MIDDLE NAME	DESCALLAR		(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	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPRION (FCIC)	ELEMENTARY GRADUATE	1990	1996		1996	
SECONDARY	VISCA LABORATORY HIGHSCHOOL (VLHS)	HIGHSCHOOL GRADUATE	1996	2000		2000	
VOCATIONAL / TRADE COURSE							
COLLEGE	VISAYAS STATE UNIVERSITY (VSU)	BACHELOR OF SCIENCE IN DEVELOPMENT COMMUNICATION MAJOR IN DEVELOPMENT JOURNALISM	2000	2008		2008	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY (VSU)	MASTER OF SCIENCE IN TROPICAL ECOLOGY MINOR IN DEVELOPMENT COMMUNICATION	2017	Present			

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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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)

<i>SIGNATURE</i>		<i>DATE</i>	
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[illegible]

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

(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)
	video editing				Development Communication Society
	typing				VSU Graduate Student's Society
	lay-out IEC				VSU Ultimate Frisbee Team
					Mt. Pangasugan Trailblazers Assoc. Inc.
					Mountaineering Federation of the Philippines Inc.
					Philippine Flying Disc Assoc.

<i>(Remove this page when not needed)</i>			
SIGNATURE		DATE	

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)		
NAME	ADDRESS	TEL. NO.
Dr. Guiraldo C. Fernandez, Jr.	VSU Visca Baybay, Leyte	9224009161
Dr. Jose L. Bacusmo	Sta. Cruz Baybay, Leyte	9686906880
Dr. Monina M. Escalada	Gabas, Baybay, Leyte	9189239657
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: Driver's License ID/License/Passport No.: H-12-08-000825 Date/Place of Issuance: 3/3/2022/Baybay, Leyte	<div style="border: 1px solid black; height: 100px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Signature (Sign inside the box)</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Date Accomplished</div>	<div style="text-align: center;">  PHOTO </div> <div style="border: 1px solid black; height: 100px; margin-top: 20px;"></div> <div style="text-align: center; padding-top: 5px;">Right Thumbmark</div>
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: 300px; height: 60px; margin: 0 auto;"></div> <div style="border: 1px solid black; padding: 5px; width: 300px; margin: 0 auto;">Person Administering Oath</div>		