

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	Sacro		
FIRST NAME	Reynaldo	NAME EXTENSION (JR., SR) Jr.	
MIDDLE NAME	Frades		
3. DATE OF BIRTH (mm/dd/yyyy)	05/27/1986	16. CITIZENSHIP	☒ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization Pls. indicate country:
4. PLACE OF BIRTH	Baybay City, Leyte	If holder of dual citizenship, please indicate the details.	Philippines
5. SEX	☒ Male ☐ Female		
6. CIVIL STATUS	☐ Single ☒ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	Emilio Jacinto House/Block/Lot No. Street Poblacion Zone 23 Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province 6521
7. HEIGHT (m)	1.63	18. PERMANENT ADDRESS	Emilio Jacinto House/Block/Lot No. Street Poblacion Zone 23 Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province 6521
8. WEIGHT (kg)	66.50		
9. BLOOD TYPE	N/A		
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	121333889988		
12. PHILHEALTH NO.	130500797666	ZIP CODE	6521
13. SSS NO.	0627763432	19. TELEPHONE NO.	N/A
14. TIN NO.	297488479000	20. MOBILE NO.	922-742-1625
15. AGENCY EMPLOYEE NO.	VJO02179	21. E-MAIL ADDRESS (if any)	reynaldo.sacro@vsu.edu.ph

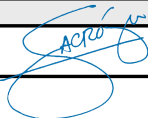
II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	SACRO		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	KRISTINE MAE	NAME EXTENSION (JR., SR) Sr.	N/A	N/A
MIDDLE NAME	OBLIGADO			
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	SACRO			
FIRST NAME	REYNALDO	NAME EXTENSION (JR., SR) Sr.		
MIDDLE NAME	BITOY			
25. MOTHER'S MAIDEN NAME	FUENTES			
SURNAME	SACRO			
FIRST NAME	ORTENCIA			
MIDDLE NAME	FRADES		(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	Carlos P. Garcia Elementary School	Elementary	1992	1998		1998	N/A
SECONDARY	Baybay National High School	High School	1998	2002		2002	N/A
VOCATIONAL/ TRADE COURSE	N/A						
COLLEGE	Visayas State University	Bachelor of Science in Agricultural Engineering	2002	2009		2009	N/A
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	04/04/2025
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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)

SIGNATURE		DATE	04/04/2025
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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		
	N/A	N/A	N/A	N/A	N/A

(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			
	Public Financial Management Workshop	09/18/2024	09/20/2024	20	Technical	Department of Budget and Management, RO8
	ISO AWARENESS / REAWARENESS SEMINAR 9001:2015	09/09/2024	09/09/2024	4	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "
	Seminar Workshop on Basic Records and Archives Management (BRAM)	07/30/2024	07/31/2024	12	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "
	Shaping Culture: Embracing Values for Productive Workplace Performance	05/15/2024	05/15/2024	8	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "
	Financial Transactions Forum	03/20/2024	03/20/2024	8	Instruction	"Visayas State University (VSU), Visca, Baybay City, Leyte "
	"HRIS Software Onboarding"	12/06/2023	12/06/2023	8	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "
	"Unlocking Excellence: The 5S Resolution for Clerks and Heads at Visayas State University"	11/09/2023	11/09/2023	8	Technical	"Visayas State University (VSU), Visca, Baybay City, Leyte "

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION		
31.	32.	33.
SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Driving	N/A	N/A
Computer Literate (MS Word, Excel, PPT presentation)		
Welding		
Carpenter/Masonry		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	04/04/2025
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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)?		☐ YES☒ NO ☐ YES☒ 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?		☐ YES☒ NO If YES, give details: _____ ☐ 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: Finished Contract												
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 items: 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) <table><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr><tr><td>JOBET ATIENZA</td><td></td><td>09076079796</td></tr><tr><td>RONEL CAPILITAN</td><td></td><td>09482957677</td></tr><tr><td>CHRISTINE LOUIE CREDO</td><td></td><td>09177009435</td></tr></table>			NAME	ADDRESS	TEL. NO.	JOBET ATIENZA		09076079796	RONEL CAPILITAN		09482957677	CHRISTINE LOUIE CREDO		09177009435
NAME	ADDRESS	TEL. NO.												
JOBET ATIENZA		09076079796												
RONEL CAPILITAN		09482957677												
CHRISTINE LOUIE CREDO		09177009435												
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.		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												
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: N/A ID/License/Passport No.: N/A Date/Place of Issuance: N/A	Signature (Sign inside the box) 04/04/2025 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														