

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	CUTAMORA		
FIRST NAME	JAY BERNARD	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	TALANDRATA		
3. DATE OF BIRTH (mm/dd/yyyy)	06/15/1988	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	TAGBILARAN CITY, BOHOL	If holder of dual citizenship, please indicate the details.	<input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input checked="" type="checkbox"/> Male <input 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"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	
7. HEIGHT (m)	1.65	ZIP CODE	House/Block/Lot No. Street
8. WEIGHT (kg)	67		Subdivision/Village Barangay
9. BLOOD TYPE	B+		UBAY BOHOL
10. GSIS ID NO.	N/A		City/Municipality Province
11. PAG-IBIG ID NO.	121283449507		6315
12. PHILHEALTH NO.	12-025548259-4	18. PERMANENT ADDRESS	
13. SSS NO.	N/A	ZIP CODE	House/Block/Lot No. Street
14. TIN NO.	489-718-364-000		Subdivision/Village Barangay
15. AGENCY EMPLOYEE NO.	N/A		UBAY BOHOL
			City/Municipality Province
			6315
19. TELEPHONE NO.	N/A	20. MOBILE NO.	(+63) 927 402 3517 / (+63) 961 435 9285
21. E-MAIL ADDRESS (if any)	jbcutamora88@gmail.com		

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	N/A	N/A
MIDDLE NAME	N/A		N/A	N/A
OCCUPATION	N/A		N/A	N/A
EMPLOYER/BUSINESS NAME	N/A		N/A	N/A
BUSINESS ADDRESS	N/A		N/A	N/A
TELEPHONE NO.	N/A		N/A	N/A
24. FATHER'S SURNAME	CUTAMORA		N/A	N/A
FIRST NAME	DEOGRACIAS	NAME EXTENSION (JR., SR) N/A	N/A	N/A
MIDDLE NAME	FLOR		N/A	N/A
25. MOTHER'S MAIDEN NAME			N/A	N/A
SURNAME	TALANDRATA		N/A	N/A
FIRST NAME	JOCELYN		N/A	N/A
MIDDLE NAME	GONZALES		(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 Pascual Elementary School	Primary Education	1995	2001	Graduated	2001	N/A
SECONDARY	San Pascual National Agricultural High School	High School	2001	2006	Graduated	2006	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	Visayas State University	Bachelor of Science in Agriculture (Agronomy)	2011	2016	Graduated	2016	N/A
GRADUATE STUDIES	Visayas State University	Master of Science (Agronomy)	2017	2020	Graduated	2020	DOST-ASTHRDP

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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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	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)		
						NUMBER	Date of Validity	
	Licensure Examination for Agriculturist		77	Oct. 19 - 21, 2016	Tacloban City, Leyte, Philippines	0025041	06/15/2023	
	N/A		N/A	N/A	N/A	N/A	N/A	
	N/A		N/A	N/A	N/A	N/A	N/A	
	N/A		N/A	N/A	N/A	N/A	N/A	
	N/A		N/A	N/A	N/A	N/A	N/A	
	N/A		N/A	N/A	N/A	N/A	N/A	
	N/A		N/A	N/A	N/A	N/A	N/A	
(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.								
28.	INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
	From	To						
	02/15/2022	06/18/2022	Instructor	Department of Agronomy, Visayas State University, Visca, Baybay City, Leyte	N/A	N/A	Part-Time	Y
	08/16/2021	12/24/2021	Instructor	Department of Agronomy, Visayas State University, Visca, Baybay City, Leyte	N/A	N/A	Part-Time	Y
	04/05/2021	07/15/2021	Instructor	Department of Agronomy, Visayas State University, Visca, Baybay City, Leyte	N/A	N/A	Part-Time	Y
	01/06/2020	06/15/2020	Graduate Teaching Assistant	Department of Agronomy, Visayas State University, Visca, Baybay City, Leyte	N/A	N/A	N/A	Y
	08/02/2016	05/23/2017	Instructor	Department of Agronomy, Visayas State University, Visca, Baybay City, Leyte	N/A	N/A	Part-Time	Y
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
(Continue on separate sheet if necessary)								
SIGNATURE					DATE			

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
	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A
	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			
	Training-Workshop on Soil and Nutrient Management and Assessing Soil Health	08/30/2022	08/31/2022	16	N/A	DA - Bureau of Soils and Water Management via Zoom
	2nd International Virtual Congress and PAA 2022 Agriculturists' Summit	07/21/2022	07/23/2022	24	N/A	Philippine Association of Agriculturists, Inc. via Zoom
	National Conference on Agricultural Science and Technology	03/24/2022	03/25/2022	16	N/A	Bataan Peninsula State University Main Campus via Zoom
	1st UDM International Research Congress	06/28/2022	06/28/2022	8	N/A	Universidad de Manila via Zoom
	National Conference on Agricultural Science and Technology	03/24/2022	03/25/2022	16	N/A	Bataan Peninsula State University Main Campus via Zoom
	17th National Occupational Safety and Health Congress	09/28/2021	09/30/2021	24	N/A	Department of Labor and Employment via Zoom
	International Webinar and Workshop on Food Value Chain in the New Normal	10/18/2021	10/22/2021	15	N/A	Visayas State University, Visca, Baybay City, Leyte
	16th National Vegetable Congress	09/27/2017	09/29/2017	24	N/A	City Government of Tacloban / Department Agriculture, RFO 8
	NCIII Certification: Harnessing AEWs Capabilities on Agri-Crop Production	09/14/2015	09/14/2015	32	Technical	Technical Education and Skills Development Authority / Agricultural Training Institute, R8
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A

(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)
	Computer literate: MS Word, MS Excel, MS PowerPoint		N/A		N/A
	Web browsing and surfing		N/A		N/A
	Knows minor computer repair		N/A		N/A
	Knows how to drive motorcycle with valid drivers license		N/A		N/A
	N/A		N/A		N/A
	N/A		N/A		N/A
	N/A		N/A		N/A

(Continue on separate sheet if necessary)

SIGNATURE	DATE
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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)			
NAME		ADDRESS	TEL. NO.
Dr. Ulysses A. Cagasan		Visayas State University, Visca, Baybay City, Leyte	(+63) 945 230 9477
Dr. Ruth O. Escasinas		Visayas State University, Visca, Baybay City, Leyte	(+63) 915 962 6403
Dr. Berta C. Ratilla		Visayas State University, Visca, Baybay City, Leyte	(+63) 926 259 7123
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.			
<div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: PRC</div> <div>ID/License/Passport No.: 0025041</div> <div>Date/Place of Issuance: 08/05/2020 PRC, Tacloban City, Leyte</div>		<div></div> <div>Signature (Sign inside the box)</div> <div></div> <div>Date Accomplished</div>	
		<div></div> <div>Right Thumbmark</div>	
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.			
<div></div> <div>Person Administering Oath</div>			