

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	LATRAS		
FIRST NAME	MARK VINCENT		NAME EXTENSION (JR., SR) N/A
MIDDLE NAME	GOFREDO		
3. DATE OF BIRTH (mm/dd/yyyy)	7/10/1993	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.	<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 CITY, LEYTE		
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married	17. RESIDENTIAL ADDRESS	ZONE 6 N/A
	<input type="checkbox"/> Widowed <input type="checkbox"/> Separated		House/Block/Lot No. Street
	<input type="checkbox"/> Other/s:		N/A BRGY. GUADALUPE
			Subdivision/Village Barangay
7. HEIGHT (m)	175		BAYBAY CITY LEYTE
8. WEIGHT (kg)	60		City/Municipality Province
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS	ZONE6 N/A
10. GSIS ID NO.	N/A		House/Block/Lot No. Street
11. PAG-IBIG ID NO.	N/A		N/A BRGY. GUADALUPE
			Subdivision/Village Barangay
12. PHILHEALTH NO.	13-025351759-0		BAYBAY CITY LEYTE
13. SSS NO.	09-4610597-5		City/Municipality Province
14. TIN NO.	703-162-512		6521-A
15. AGENCY EMPLOYEE NO.	NwSSU (Northwest Samar State University)	19. TELEPHONE NO.	N/A
		20. MOBILE NO.	09212125478 / 09359458374
		21. E-MAIL ADDRESS (if any)	marklatras07@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		
	MIDDLE NAME	N/A		
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	LATRAS			
	FIRST NAME	ELMER NAME EXTENSION (JR., SR) N/A		
	MIDDLE NAME	VILLARAZA		
25. MOTHER'S MAIDEN NAME				
	SURNAME	GOFREDO		
	FIRST NAME	REBECCA		
	MIDDLE NAME	LAMOSTE	(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	GABAS CENTRAL SCHOOL	ELEMENTARY GRADUATE	16/6/2000	5/4/2006		2006	SALUTATORIAN
SECONDARY	VSU LABORATORY HIGH SCHOOL	High School	13/6/2006	15/4/2010		2010	
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	VISAYAS STATE UNIVERSITY	Bachelor of Science in Agriculture Major in Soil Science	13/6/2010	7/4/2015		2015	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	Master of Science Soil Science	13/6/2010	19/6/2019		2019	DOST SCHOLAR

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(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)

[illegible]

(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)
BASKETBALL	N/A	Philippine Association of Agriculturist (PAA)
HIKING		PSSST (Philippine Society of Soil Science and Technology, Inc.)
TRAVEL		
RESEARCH		

(Continue on separate sheet if necessary)

<i>SIGNATURE</i>		<i>DATE</i>	
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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:

FAMILY RELATED EMERGENCY

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)

NAME	ADDRESS	TEL. NO.
Rosalia L. Briones, PhD	Guadalupe, Baybay City, Leyte	9051960750
Michael Adonis Sudaria, MSc.	Capoocan, Calbayog City, Western Samar	9069415034
Nelissa Sudaria, MSc.	Capoocan, Calbayog City, Western Samar	9067248756

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.

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: DRIVER'S LICENSE

ID/License/Passport No.: H08-21-202298

Date/Place of Issuance:

Signature (Sign inside the box)

02/01/2024

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this 06 FEB 2024, affiant exhibiting his/her validly issued government ID as indicated above.

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Book No. XI

Series of 2024

Notary Public

Rueda St. Brgy. Balud, Calbayog City

for and within Samar and Calbayog City

Until December 31, 2025

Roll Number No. 76873

Person Administering Oath

PTK No. 2616618, 0403-2022, Calbayog City

IDP No. 3164711, 12/02/2022, Samar Chapter

NC Serial No. 2024-03

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