

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                    | GAJUTOS   |   |  |
| FIRST NAME                    | LEAH JOYCE  | NAME EXTENSION (JR., SR)                                    |  |
| MIDDLE NAME                   | BAJADO  |   |  |
| 3. DATE OF BIRTH (mm/dd/yyyy) | December 15, 1996   | 16. CITIZENSHIP   | <input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship<br><input type="checkbox"/> by birth <input type="checkbox"/> by naturalization<br>Pls. indicate country: |
| 4. PLACE OF BIRTH             | Catarman, Norhem Samar  | If holder of dual citizenship, please indicate the details. |  |
| 5. SEX                        | <input type="checkbox"/> Male <input type="checkbox"/> Female   |   |  |
| 6 CIVIL STATUS                | <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married<br><input type="checkbox"/> Widowed <input type="checkbox"/> Separated<br><input type="checkbox"/> Other/s: |   |  |
| 7. HEIGHT (m)                 | 1.676   | 17. RESIDENTIAL ADDRESS                                     | 109<br>House/Block/Lot No. Street<br>Sunrise Village UEP Zone 1<br>Subdivision/Village Barangay<br>Catarman Northern Samar<br>City/Municipality Province   |
| 8. WEIGHT (kg)                | 55  | ZIP CODE  | 6400   |
| 9. BLOOD TYPE                 | O   | 18. PERMANENT ADDRESS                                       | 109<br>House/Block/Lot No. Street<br>Sunrise Village UEP Zone 1<br>Subdivision/Village Barangay<br>Catarman Northern Samar<br>City/Municipality Province   |
| 10. GSIS ID NO.               | N/A   | ZIP CODE  | 6400   |
| 11. PAG-IBIG ID NO.           | N/A   | 19. TELEPHONE NO.   | N/A  |
| 12. PHILHEALTH NO.            | N/A   | 20. MOBILE NO.  | 09166048623 / 09120713584  |
| 13. SSS NO.                   | N/A   | 21. E-MAIL ADDRESS (if any)                                 | leahjoyce13@gmail.com  |
| 14. TIN NO.                   | N/A   |   |  |
| 15. AGENCY EMPLOYEE NO.       | N/A   |   |  |

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               |         | NAME EXTENSION (JR., SR) | N/A   |                            |
| MIDDLE NAME              |         |                          |   |                            |
| OCCUPATION               |         |                          |   |                            |
| EMPLOYER/BUSINESS NAME   |         |                          |   |                            |
| BUSINESS ADDRESS         |         |                          |   |                            |
| TELEPHONE NO.            |         |                          |   |                            |
| 24. FATHER'S SURNAME     | GAJUTOS |                          |   |                            |
| FIRST NAME               | LUCIANO | NAME EXTENSION (JR., SR) |   |                            |
| MIDDLE NAME              | OLESCO  |                          |   |                            |
| 25. MOTHER'S MAIDEN NAME |         |                          |   |                            |
| SURNAME                  | BAJADO  |                          |   |                            |
| FIRST NAME               | AURELIA |                          |   |                            |
| MIDDLE NAME              | BEATO   |                          | (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                | Cawayan Integrated School (CIS)                                  | Primary Education                             | 2006                 | 2008 |  | 2008           |  |
| SECONDARY                 | University of Eastern Philippines Laboratory Highschool (UEPLHS) | Secondary Education                           | 2008                 | 2012 |  | 2012           | 8th HONORABLE MENTION                  |
| VOCATIONAL / TRADE COURSE | N/A  | N/A   | N/A                  | N/A  | N/A  | N/A            | N/A                                    |
| COLLEGE                   | University of Eastern Philippines                                | BS FISHERIES major in Aquaculture             | 2012                 | 2016 |  | 2016           |  |
| GRADUATE STUDIES          | Central Luzon State University                                   | Master of Science in Aquaculture              | 2016                 | 2019 |  | 2020           | DOST ASTHRDP                           |

(Continue on separate sheet if necessary)

|           |   |      |               |
|-----------|---|------|---------------|
| SIGNATURE |  | DATE | July 24, 2020 |
|-----------|---|------|---------------|

#### IV. CIVIL SERVICE ELIGIBILITY


| 27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER<br>SPECIAL LAWS/ CES/ CSEE<br>BARANGAY ELIGIBILITY / DRIVER'S LICENSE | RATING<br>(If Applicable) | DATE OF<br>EXAMINATION /<br>CONFERMENT | PLACE OF EXAMINATION / CONFERMENT         | LICENSE (if applicable)   |                     |
|--|---------------------------|--|---|---------------------------|---------------------|
|  |                           |  |   | NUMBER                    | Date of<br>Validity |
| <b>Fisheries Technologist</b>  |                           | <b>October 13-14,<br/>2016</b>         | <b>College of the Holy Spirit, Manila</b> | <b>0002199</b>            | <b>12/15/2022</b>   |
| <b>Non-Professional Driver's License</b>   |                           |  | <b>Catarman Northern Samar</b>            | <b>H06-16-<br/>001060</b> | <b>12/15/2024</b>   |
|  |                           |  |   |                           |                     |
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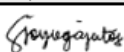
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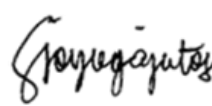

## V. WORK EXPERIENCE

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| <b>SIGNATURE</b> |  | <b>DATE</b> | July 24, 2020 |  |
|------------------|---|-------------|---------------|--|

| VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S  |   |   |  |                    |   |   |
|--|---|---|--|--------------------|---|---|
| 29.  | NAME & ADDRESS OF ORGANIZATION<br>(Write in full)   | INCLUSIVE DATES<br>(mm/dd/yyyy)   |  | NUMBER OF<br>HOURS | POSITION / NATURE OF WORK   |   |
|  |   | From  | To   |                    |   |   |
|  | N/A   | N/A   | N/A  | N/A                | N/A   |   |
|  |   |   |  |                    |   |   |
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| 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<br>(Write in full)  | INCLUSIVE DATES OF<br>ATTENDANCE<br>(mm/dd/yyyy)                                    |  | NUMBER OF<br>HOURS | Type of LD<br>( Managerial/<br>Supervisory/<br>Technical/etc)     | CONDUCTED/ SPONSORED BY<br>(Write in full)          |
|  |   | From  | To   |                    |   |   |
|  | 3rd CF/FAC In-House Student Research Review   | 08/23/2019  | 08/23/2019   | 8.0                | Technical   | College of Fisheries / Fisheries Aquaculture Center |
|  | ASTHRDP Graduate Scholars Conference - Year 8   | 05/02/2019  | 05/03/2019   | 16.0               | Technical   | Department of Science and Technology                |
|  | 2nd Graduate Student Research Colloquim   | 05/09/2019  | 05/09/2019   | 8.0                | Technical   | College of Fisheries / Fisheries Aquaculture Center |
|  | Seminar on Tilapia Infectious Diseases in Thailand: Research and Practice   | 05/07/2019  | 05/07/2019   | 8.0                | Technical   | College of Fisheries / Fisheries Aquaculture Center |
|  | 1st CF/FAC In-House Student Research Review   | 02/02/2019  | 02/02/2019   | 8.0                | Technical   | College of Fisheries / Fisheries Aquaculture Center |
|  | 5th Tilapia Congress 2017   | 10/12/2017  | 10/13/2017   | 16.0               | Technical   | Bureau of Fisheries and Aquatic Resources - RIII    |
|  | E3 – STArt (Education, Environment, Entrepreneurship, Science, Technology, Arts) International Academic R&D Festival: Research Poster | 08/30/2017  | 09/01/2017   | 16.0               | Technical   | Central Luzon State University (CLSU)               |
|  | Agricultural Biotechnology Career Orientation for Potential Researchers on Biotechnology Research and Development Program             | 11/23/2016  | 11/23/2016   | 8.0                | Technical   | Department of Agriculture (DA)                      |
|  | Glocalization: Culture and Perspective  | 10/01/2016  | 10/01/2016   | 8.0                | Technical   | CLSU Institute of Graduate Studies                  |
|  | Marine Biodiversity Conservation: Key for Sustaining Ecosystem Goods and Services   | 10/24/2013  | 10/26/2013   | 24.0               | Technical   | Philippine Association of Marine Science            |
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| VIII. OTHER INFORMATION  |   |   |  |                    |   |   |
| 31.  | SPECIAL SKILLS and HOBBIES  | 32.   | NON-ACADEMIC DISTINCTIONS / RECOGNITION<br>(Write in full) | 33.                | MEMBERSHIP IN<br>ASSOCIATION/ORGANIZATION<br>(Write in full)      |   |
|  | Computer Literate   |   | N/A  |                    | UEP Alumni Association  |   |
|  | Internet Surfing  |   |  |                    | CLSU Alumni Association   |   |
|  | Motorcycle Driving  |   |  |                    | CLSU Graduate School Association<br>(CLSU-GSA)                    |   |
|  |   |   |  |                    | College of Fisheries - Graduate<br>Student Association (CF-GSA)   |   |
|  |   |   |  |                    | Asosasyon ng mga Propesyonal sa<br>Pangisdaan ng Pilipinas (APPP) |   |
|  |   |   |  |                    |   |   |
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| (Continue on separate sheet if necessary)  |   |   |  |                    |   |   |
| SIGNATURE  |   |  |  | DATE               | July 24, 2020   |   |
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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,<br>a. within the third degree?<br>b. within the fourth degree (for Local Government Unit - Career Employees)?   | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, give details: _____  |   |
| 35. a. Have you ever been found guilty of any administrative offense?<br><br>b. Have you been criminally charged before any court?   | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, give details: _____<br><br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, give details: _____<br>Date Filed: _____<br>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<br>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<br>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)?<br><br>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<br>If YES, give details: _____<br><br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>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<br>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:<br>a. Are you a member of any indigenous group?<br><br>b. Are you a person with disability?<br><br>c. Are you a solo parent?  | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, please specify: _____<br><br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, please specify ID No: _____<br><br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, please specify ID No: _____ |   |
| 41. REFERENCES (Person not related by consanguinity or affinity to applicant / appointee)  |  |   |
| NAME   | ADDRESS  | TEL. NO.  |
| Dr. Ronelie C. Salvador  | University of Eastern Philippines  | 9054852744  |
| Dr. Ravelina R. Velasco  | College of Fisheries, Central Luzon State University   | 9175163605  |
| Dr. Emmanuel M. Vera Cruz  | Central Luzon State University / Freshwater Aquaculture Center   | 9088918635  |
| 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. |  | <br>LEAH JOYCE B. SANTOS |
| Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) <b>PLEASE INDICATE ID Number</b><br>Government Issued ID: <b>PRC ID</b><br>ID/License/Passport No. <b>0002199</b><br>Date/Place of Issuance: <b>Manila, Philippines</b>   | <br>Signature (Sign inside the box)<br><b>July 24, 2020</b><br>Date Accomplished   | <br>Right Thumb mark     |
| SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.  |  |   |
| Person Administering Oath  |  |   |