PERSONAL DATA SHEET

on made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of adm READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM (Do not fill up. For CSC use only Print legibly. Tick appropriate boxes (1) and use separate sheet if necessary. Indicate NA if not applicable. DO NOT ABBREVIATE. 1. CS D No. I. PERSONAL INFORMATION 2. SURNAME Oracion WHE EXTENSION UR. SRI FIRST NAME Aiza Canales MIDDLE NAME 3. DATE OF BIRTH 10-15-1991 IS CITIZENSHIP ☑ Filipino Dual Otizenship (mm/dd/yyyy) by birth by naturalization Pls. indicate country: 4. PLACE OF BRTH Hilongos Leyte If holder of dual olizonship. please indicate the details. ☐ Male ☑ Female S. SEX ☐ Single ☑ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS Block Let No. Sheet ☐ Widows ☐ Separated Other/s: System Wilden Leyte 7. HEIGHT (m) 1.23 Cty Municipality Province & WEIGHT (kg) ZIP CCCE Centro 18. PERMANENT ACCRESS Ninne 9. BLOOD TYPE 0+ None 10. GSIS ID NO. Subdivision/Village None 11. PAG-BIG ID NO. 6521 ZIP CODE 12. PHILHEALTH NO. 5627282 9. TELEPHONE NO. 13 SSS NO. 09039029644 14. TIN NO. O MOBILE NO. 15. AGENCY EMPLOYEE NO. 1. E-MAL ADDRESS (Fary) oracion15.aiza@gmail.com II. FAMILY BACKGROUND Oracion 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) 22. SPOUSE'S SURNAME AME EXTENSION UR. SR) 10/28/2013 FIRST NAME Rolando 08/30/2015 Ibanez MIDDLE NAME ADMIT COMM 07/25/2017 Admin Aide 1 OCCUPATION **Viasayas State University** EMPLOYER BUSINESS NAME **BUSINESS ADDRESS** VISCA Baybay City, Leyte TELEPHONE NO. 5637282 Oracion A FATHER'S SURNAME Wilfredo DIRST NAME Basez MIDDLE NAME MOTHER'S MAIDEN NAME Oracion EIRST NAME (Continue on separate shoot if necessary) Banez MODILE NAME EDUCATIONAL BACKGROUND HIGHEST LEVEL PERCO OF ATTENDANCE BASIC EDUCATION DEGREE COURSE NAME OF SCHOOL LEVEL inte in full) (If not grad To From Third Hone 03/30/2005 01/1999 ELEMENTARY Hampangan Elementary School With Honor 2009 Sta. Margarita National High School 03/30/2009 SECONDARY VOCATIONAL / TRADE COURSE 91/2009 03/28/2013 2013 Visayas State University COLLEGE 2016 Visayas State University 91/2913 4/30/2016 **GRADUATE STUDIES** DATE September 21, 2020 SIGNATURE

| | SERVICE ELIC | SIBILITY | · | | 70 | | | | |
|--|--------------|-------------------------------------|----------------------------|---|---|-----------------------|----------------------------|---|------------------|
| 77. CAREER SERVICE! RA 1080 (BOARD! BAR) UNDER SPECIAL LAWS! CES! CSEE | | RATING DATE OF EXAMINATION / | | PLACE OF EXAMINA | TION / CONFERMENT | | UCENSE (f applicable) | | |
| SPECIAL LAWS! CES! CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE | | | (If Applicable) | CONFERMENT | | | NUMBER | Date of Validity | |
| | No | ne . | | 95 | | | | | |
| o' | | | | | 8 | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| X | (),5555)(2) | | | 3 % | | | | | |
| - | | | | + | | | | | \vdash |
| | | | | | | | | | |
| | | | (Ce | ontinue on separate sheet | if necessary) | | | | |
| SCHOOLSHOOM | EXPERIENCE | | | | | | | -11 | |
| 28. INCL | LUSIVE DATES | ent. Start from your recen | | | | 10077777 | SALARY JOB PAY GRACE (F | 2007/00/00/00 | GOYT |
| (1 | mm/dd/yyyy) | POSITION 1 (Write in full/Do not | | DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate) | | SALARY spication STEP | | STATUS OF APPOINTMENT | SERVICE (Y/N) |
| From 4/01/2015 | 05'30'2015 | Admin A | lda . | Department of Ag | Department of Agricultual Extension and | | NOREMENT | Job order | Yes |
| 10/91/2015 | 10/30/2017 | Extension As | 3000000 | Education Department of Agricultural Extension and | | 5944.00 10000.00 | None | Project based | Yes |
| 14442013 | Tubucon/ | - | | E | fucation | | | Project oases | |
| 3 | | | | 9 /2 S | | | | | |
| 0 | | | | | | | | | |
| G G | 8 | | | | | | | | |
| 8 | | | | 50 (S) (S) (2) | | | | | |
| 9 | | | | | | | | | |
| 8 | | | | | | | | | |
| | | | | | | | | | |
| 9885 - UFITE - 12 | | - Helelinian | | | | | | | |
| | | protote diministrati | | | ****** | | | | |
| 0.000 | | | | | 77-007-00 | | | | |
| A.V | | | | | V V V | | | | |
| | | | 55 55 55 55 55 55 55 55 55 | | V-V-V-TV | | | | |
| | | | | | | | | | |
| 6 | | | | | | | 8 | | |
| | | 20 | | | | | | | |
| | | | | 3.0 | ii. 20 00 00 | 0075 | | | - |
| e dels | es estis | | - NA | 1.00 | | SAL | | - | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | <u> </u> |
| | | | | | | | | *************************************** | <u> </u> |
| S | 1 | <u> </u> | (Co | ontinue on separate sheet | il necessary) | | | | |
| SIGN | IATURE | 80 | | | DATE | | Sept. 21, 2020 | | |

| In Water | UTARY II ORK OR BUG I THE | THE CHIEF I HOW CONTOURS | F / DF 021 51 | VALUE CO | 000444747 | TON IS | |
|--|--|--|---|-----------------------|---|-----------------------|---|
| | NTARY WORK OR INVOLVEMENT NAME & ADDRESS OF O | TO LESS A CONTROL DE C | Selligibility to deliberate the | VOLUNITARE E DATES | ORGANIZAT | IONS | |
| 29. | (Attenta | 1 | | d'yyyy) To | NAME OF HOUSE | | POSITION / NATURE OF WORK |
| None | | | | | į. | | |
| 9 | | | | | | | |
| - | | | | | | | |
| | | | - | - | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | - | | | | | |
| VII. LEAR | RNING AND DEVELOPMENT (L&D | | ROGRAMS A | | 1 | | |
| 30. TITLE OF LEARNING AND DEVELOPMENT INTERVENITIONS/TRAINING PROGRAMS (After in Ed) | | INC. USIVE DATES OF ATTENDANCE (mm/dd/yyyr) | | NUMERO POAS | Type of LD (Managerial CONDUCTED' SPONSORED BY Superisory (Nitre in full) Technicalists | | |
| None | | | fin | To | | | |
| | | | | | | - 3 | |
| - | | | | | | - 1 | |
| - | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| *************************************** | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| o e | | | | | | | × |
| | | | | | | | |
| | | | | | 2 | | |
| (| | | | | | | |
| | | | | CONTROL DO | 200 | | |
| | | | | | | | |
| Ĵ | | | | | | 3 | |
| | 6/15/15/15/15/15/15/15/15/15/15/15/15/15/ | | 2,700,700,000 | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | 073.6707376. 35 38 | |
| VIII. OTH | ER INFORMATION | (Con | tinue on segarate | sheet if necessary | 1 | | |
| 31. | SPECIAL SIGLES and HOSBIES | 32. NON | ACADEMIC DISTI | CTIONS / RECO | ENTION | | 33. NEMBERSHIP IN ASSOCIATION ORGANIZATION (Note in £1) |
| | Computer literate | | Non | • | | | Philippine Association of Extension Program Implementers (PAEPI) Philippine Extension and Advisory Services |
| | Landscaping | 1000 | 188 | | | | Philippine Extension and Advisory Services network inc. |
| | | | | | | | |
| | xcxcxxxx0039900390000000000000000000000000 | | wa ta | | | | Society of Agricultural Educators Region V111 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | 9 |
| | SIGNATURE | Arial Con | tinue on segarate : | unces d' necessary | | ATE | Sept. 21, 2020 |

| 34. Are you related by consanguinity or affinity to the appointing | g or recommending authority, or to the | | | | |
|---|---|--|--|--|--|
| chief of bureau or office or to the person who has immediate | e supervision over you in the Office, | I | | | |
| Bureau or Department where you will be apppointed, | | | _ | | |
| a. within the third degree? | | ☐ YES | ☑ NO | | |
| b. within the fourth degree (for Local Government Unit - Car | reer Employees)? | | ☑ NO | | |
| | | If YES, give detail | k | | |
| | | | | | |
| 35. a. Have you ever been found guilty of any administrative of | lense? | ☐ YES | ☑ NO | | |
| | | If YES, give detail | E | | |
| | | ************************************** | 225 | | |
| | | - | B | | |
| b. Have you been criminally charged before any court? | | ☐ YES If YES, give detail | ☑ NO | | |
| | | Date Filed: | - | | |
| | | Status of Case/s: | (i) | | |
| 36. Have you ever been convicted of any crime or violation of a | ou law damage or finance or requisition | | | | |
| by any court or tribunal? | ily an, course, durance or regulation | ☐ YES If YES, give detail | ☑ NO | | |
| o) any access access. | | if tea, give detail | • | | |
| | | | | | |
| 37. Have you ever been separated from the service in any of th | | ☐ YES | ☑ NO | | |
| retirement, dropped from the rolls, dismissal, termination, er out (abolition) in the public or private sector? | nd of term, finished contract or phased | If YES, give details: | | | |
| out (apolition) in the public or private sector? 38. a. Have you ever been a candidate in a national or local ele | ction held within the last year leveent | - | T 10 | | |
| 38. a. Have you ever been a candidate in a national or local ele Barangay election)? | recent trees around not near Jeen fewerby | ☐ YES If YES, give deta | is: ☑ NO | | |
| | | | | | |
| b. Have you resigned from the government service during the | | | | | |
| election to promote/actively campaign for a national or local | | If YES, give deta | · | | |
| 39. Have you acquired the status of an immigrant or permanent | t resident of another country? | ☐ YES ☑ NO | | | |
| | | If YES, give detail | s (country): | | |
| | | - | | | |
| Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma | | | | | |
| 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), | , please answer the following items: | 18879501000000 | | | |
| Are you a member of any indigenous group? | | ☐ YES If YES, please specif | ☑ NO | | |
| Are you a person with disability? | | YES | y. ☑ NO | | |
| , | | If YES, please specif | | | |
| - Are you a solo parent? | | ☐ YES | ☑ NO | | |
| | | If YES, please specif | | | |
| 41. REFERENCES (Person not related by consanguinity or affinity to applicant | (appointee) | | | | |
| NAME | ADDRESS | TEL. NO. | | | |
| | 100000 | | 02-10-1 | | |
| Antonia Cecilia Y. Sandoval PhD | VSU, VISCA Baybay City, Leyte | 09233057637 | | | |
| Rowena Dt. Baconguis PhD | University of the Philippines Los Banos, | 09178196804 | | | |
| 2-1-1-2-1-2-22 | Laguna University of the Philippines Los Banos, | bgflor1up.edu.p | | | |
| Benjamina Paula G. Flor PhD | Laguna | h | 3101-1112 | | |
| 42 I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine | | | | | |
| Philippines. I authorize the agency head/authorized repri | | | | | |
| I agree that any misrepresentation made in this doc | | | PHOTO | | |
| administrative/criminal case/s against me. | | | The state of the s | | |
| | | | | | |
| Government Issued ID (in Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance | 0.0 | | 1 | | |
| Government Issued ID: | Mauro D | | | | |
| | 00 | | 1 1 | | |
| DiLicense/Passport No.: P20044308 | ex) | 1 | | | |
| DatePlace of Issuance: June 19, 2019/ DFA SAN Pable Laguna | | Right Thumbmark | | | |
| | | roja munufat | | | |
| SUBSCRIBED AND SWORN to before me this | ng his/her validly issued | government ID as indicated above. | | | |
| | | | | | |
| ı | | | | | |
| I | | | | | |
| <u></u> | Person Administering Oat | | | | |
| | h . | | | | |