

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 ( ) & ( ) 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	ARPOCEPLE		
FIRST NAME	ROBERTO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	SANCHEZ		
3. DATE OF BIRTH (mm/dd/yyyy)	09/14/1977	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	Baybay, Leyte	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 type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	Philippines ▼
7. HEIGHT (m)	1.6002	ZIP CODE	House/Block/Lot No. Street
8. WEIGHT (kg)	75		Subdivision/Village Barangay
9. BLOOD TYPE	B		Baybay City Leyte
10. GSIS ID NO.	N/A		City/Municipality Province
11. PAG-IBIG ID NO.	121-0313-2152		
12. PHILHEALTH NO.	13-200733388-2	18. PERMANENT ADDRESS	6521
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A
14. TIN NO.	930-232-641	20. MOBILE NO.	09552064968
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	<a href="mailto:robertoarpoceple1977@gmail.com/">robertoarpoceple1977@gmail.com/</a> <a href="mailto:Roberto.arpoceple@vsu.edu.ph">Roberto.arpoceple@vsu.edu.ph</a>

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	ARPOCEPLE		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ELVIRA	NAME EXTENSION (JR., SR)	ROMMEL C. ARPOCEPLE	09/23/2001
MIDDLE NAME	COSARE		AILYN C. ARPOCEPLE	09/20/2000
OCCUPATION	Housewife			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	ARPOCEPLE			
FIRST NAME	LEBRADO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	GALO			
25. MOTHER'S MAIDEN NAME				
SURNAME	SANCHEZ			
FIRST NAME	PASTORA			
MIDDLE NAME	GARMA		(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	GUADALUPE ALS CENTER	N/A	N/A	N/A	COMPLETER	2024	N/A
SECONDARY	GUADALUPE ALS CENTER	N/A	N/A	N/A	COMPLETER	2025	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	NA/	N/A	N/A
COLLEGE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	09/16/2025
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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				

(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			
	User's Training of Fluke 1625-2 KIT, Fluke 1630-2, Fluke-ii910, Fluke-1777, Fluke-Tis60+9Hz, Fluke-2042 and Fluke-Ti480 PRO	06/28/2024	06/29/2024	16 hrs	Participant	Visayas State University
	Proper Operation, Maintenance and Application of the Mantall Articulating Boom Lift model HZ160J	03/22/2024	03/22/2024	8 hrs	Participant	Wilan Merchandising Phils., Inc.
	Hands-only Cardiopulmonary Resuscitation	07/21/2022	07/22/2022	16 hrs	Participant	Visayas State University
	Seminar Workshop on Public Accountabilty, Customer Service & PMS-OPES for GSD Staff	01/19/2010	01/19/2010	8 hrs	Participant	Visayas State University
	Seminar on Barangay Tanod Proficiency	02/17/2025	02/17/2025	8 hrs	Participant	Guadalupe, Baybay City, Leyte

(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)
	Driving		N/A		N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	09/16/2025
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	Proper Operation, Maintenance and Application of the Mantall Articulating Boom Lift model HZ160J	03/22/2024	03/22/2024	8 hrs	Participant	Wilan Merchandising Phils., Inc.
	Hands-only Cardiopulmonary Resuscitation	07/21/2022	07/22/2022	16 hrs	Participant	Visayas State University
	Seminar Workshop on Public Accountabilty, Customer Service & PMS-OPES for GSD Staff	01/19/2010	01/19/2010	8 hrs	Participant	Visayas State University
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	Driving		N/A		N/A

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