Revised 2017	PERSO	NAL DAT	A SH	IEE1	Г				
WARNING: Any misrepresenta	tion made in the Personal Data Sheet and th					/criminal case/s	against the n	erson	
concerned.	TO FILLING OUT THE PERSONAL DATA SE					orminar dasc, s	agamot the p	Cison	
Print legibly. Tick appropriate boxes) and use separate sheet if necessary. Indicate				1. CS ID No.		(Do not fill up. F	or CSC use only)	
. PERSONAL INFORMATION 2. SURNAME									
FIRST NAME	BONGCALES MARIAN NAME EXTENSION (JR., SR)								
MIDDLE NAME	SACRO								
3. DATE OF BIRTH	24/08/1996	16. CITIZENSHIP							
(mm/dd/yyyy)	2 1700/1000	io. omizeroriii	☐ Filipino ☐ Dual Citizenship☐ ☐ Dual Citizenship☐ ☐ Dual Citizenship ☐ Dual Citizenship ☐ Dual Citizenship			ation			
4. PLACE OF BIRTH	BAYBAY, LEYTE	If holder of dual citize	nship,	Pls. indicate country:					
5. SEX	☐ Male	please indicate the de	etails.					•	
6 CIVIL STATUS	☐ Single ☑ Married	17. RESIDENTIAL ADDRESS	Hou	ouse/Block/Lot No. Street					
	☐ Widowed ☐ Separated ☐ Other/s:					BRO	GY. GUADALUPE		
7. HEIGHT (m)	1.53	_	В	odivision/Village AYBAY CITY,	9	Barangay LEYTE			
8. WEIGHT (kg)	52	ZIP CODE	Ci	ty/Municipality 6521			Province		
9. BLOOD TYPE	0'	18. PERMANENT ADDRESS							
10. GSIS ID NO.	N/A	4	Hou	se/Block/Lot N	0.	BRO	Street BRGY. GUADALUPE		
		-		adivision/Village AYBAY CITY,			Barangay LEYTE		
11. PAG-IBIG ID NO.	121266359022		Ci	ty/Municipality			Province		
12. PHILHEALTH NO.	13-252952848-9	ZIP CODE	6521						
13. SSS NO.	N/A 19. TELEPHONE NO. N/A								
4. TIN NO.	O. 763-843-930 20. MOBILE NO.			09368135015/09201035896					
5. AGENCY EMPLOYEE NO.	AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) <u>marian.sacro@vsu.edu.ph</u>								
I. FAMILY BACKGROUND			1				Г		
2. SPOUSE'S SURNAME		NAME EVERNOON (ID. CD)					DATE OF BIRTH (mm/dd/yyyy)		
		NAME EXTENSION (JR., SR)	23. NAME of CHI						
FIRST NAME	MARK LOUISE	NAME EXTENSION (JR., SR)			DUISE S. BON			2/2023	
FIRST NAME MIDDLE NAME	MARK LOUISE OBEÑA								
FIRST NAME	MARK LOUISE								
FIRST NAME MIDDLE NAME OCCUPATION	MARK LOUISE OBEÑA ELECTRICIAN								
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME	MARK LOUISE OBEÑA ELECTRICIAN N/A								
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS	MARK LOUISE OBEÑA ELECTRICIAN N/A N/A								
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.	MARK LOUISE OBEÑA ELECTRICIAN N/A N/A								
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME	MARK LOUISE OBEÑA ELECTRICIAN N/A N/A N/A SACRO								
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 55. MOTHER'S MAIDEN NAME	MARK LOUISE OBEÑA ELECTRICIAN N/A N/A N/A SACRO FELIX BITOY								
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 55. MOTHER'S MAIDEN NAME SURNAME	MARK LOUISE OBEÑA ELECTRICIAN N/A N/A N/A SACRO FELIX BITOY								
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 55. MOTHER'S MAIDEN NAME SURNAME FIRST NAME	MARK LOUISE OBEÑA ELECTRICIAN N/A N/A N/A SACRO FELIX BITOY GRANADA HERNANE			K GIDEON LO	DUISE S. BON	IGCALES	01/02		
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 55. MOTHER'S MAIDEN NAME SURNAME	MARK LOUISE OBEÑA ELECTRICIAN N/A N/A N/A SACRO FELIX BITOY GRANADA HERNANE IBAÑEZ			K GIDEON LO	DUISE S. BON		01/02		
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 55. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME MIDDLE NAME II. EDUCATIONAL BACKGR	MARK LOUISE OBEÑA ELECTRICIAN N/A N/A N/A SACRO FELIX BITOY GRANADA HERNANE IBAÑEZ	NAME EXTENSION (JR., SR)	CALY	(Ca	DUISE S. BON	AGCALES Description:	01/02	2/2023	
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME SURNAME FIRST NAME FIRST NAME MIDDLE NAME	MARK LOUISE OBEÑA ELECTRICIAN N/A N/A N/A SACRO FELIX BITOY GRANADA HERNANE IBAÑEZ		CALY	(Co	ontinue on sep	NGCALES	01/02	2/2023	
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 55. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME MIDDLE NAME II. EDUCATIONAL BACKGR	MARK LOUISE OBEÑA ELECTRICIAN N/A N/A N/A SACRO FELIX BITOY GRANADA HERNANE IBAÑEZ OUND	NAME EXTENSION (JR., SR) BASIC EDUCATION/DEGRI	CALY	(Ca	DUISE S. BON	narate sheet if neces HIGHEST LEVEL/ UNITS EARNED	01/02 Ssary)	SCHOLARSHIP/ ACADEMIC HONORS	
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 55. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME MIDDLE NAME MIDDLE NAME LEVEL	MARK LOUISE OBEÑA ELECTRICIAN N/A N/A N/A SACRO FELIX BITOY GRANADA HERNANE IBAÑEZ OUND	NAME EXTENSION (JR., SR) BASIC EDUCATION/DEGRE (Write in full)	CALY	(Co	ontinue on sep	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	01/02 Sary) YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 55. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME III. EDUCATIONAL BACKGR 16. LEVEL	MARK LOUISE OBEÑA ELECTRICIAN N/A N/A N/A SACRO FELIX BITOY GRANADA HERNANE IBAÑEZ OUND NAME OF SCHOOL (Write in full) BAYBAY I CENTRAL SCHOOL	NAME EXTENSION (JR., SR) BASIC EDUCATION/DEGRI (Write in full)	CALY	(CC) PERIOD OF P From 2003	ontinue on sep ITENDANCE To 2009	narate sheet if neces HIGHEST LEVEL/ UNITS EARNED (if not graduated)	01/02 Ssary) YEAR GRADUATED 2009	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 55. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME LEVEL ELEMENTARY SECONDARY VOCATIONAL /	MARK LOUISE OBEÑA ELECTRICIAN N/A N/A N/A SACRO FELIX BITOY GRANADA HERNANE IBAÑEZ OUND NAME OF SCHOOL (Write in full) BAYBAY I CENTRAL SCHOOL BAYBAY NATIONAL HIGH SCHOOL	NAME EXTENSION (JR., SR) BASIC EDUCATION/DEGRI (Write in full) N/A N/A	CALY	(Compension of American Compension of America	ontinue on sep To 2009 2013	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	O1/02 SSARY) YEAR GRADUATED 2009 2013	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED N/A N/A	
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 55. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME II. EDUCATIONAL BACKGR ELEMENTARY SECONDARY VOCATIONAL/ TRADE COURSE	MARK LOUISE OBEÑA ELECTRICIAN N/A N/A N/A N/A SACRO FELIX BITOY GRANADA HERNANE IBAÑEZ OUND NAME OF SCHOOL (Write in full) BAYBAY I CENTRAL SCHOOL BAYBAY NATIONAL HIGH SCHOOL N/A VISAYAS STATE UNIVERSITY VISAYAS STATE UNIVERSITY	BASIC EDUCATION/DEGRI (Write in full) N/A N/A	CALY	(CCC PERIOD OF A From 2003 2009 N/A	portinue on sep ATTENDANCE To 2009 2013 N/A	HIGHEST LEVEL/ UNITS EARNED (if not graduated) N/A N/A	01/02 VEAR GRADUATED 2009 2013 N/A	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED N/A N/A	

IV. CIVIL S	ERVICE ELIG	BILITY							
27. CARE	AREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER RATING DATE OF SPECIAL LAWS/ CES/ CSEE (Marchal) EXAMINATION / PLACE OF EXAMINATION / CONFER			PMENT	LICENSE (if a				
BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applica		(If Applicable)	CONFERMENT				NUMBER	Date of Validity	
L	LICENSED AGRICULTURIST 80.0		NOV. 5-7, 2019	TACLOBAN	CITY, LEYT	E	0031921	24/08/2022 (processing)	
V WORK F	EXPERIENCE		(Co	ontinue on separate shee	t if necessary)				
		ent. Start from your recei	nt work) Description	on of duties should	be indicated in the attack	hed Work Ex	perience she	eet.	
	USIVE DATES nm/dd/yyyy)	POSITION T	ITLE	DEPARTMENT / AG	DEPARTMENT / AGENCY / OFFICE / COMPANY MONTHLY			STATUS OF	GOV'T SERVICE
From	То	(Write in full/Do not		(Write in ful	I/Do not abbreviate)	SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	(Y/N)
17/01/2020	PRESENT	ADMIN. AII	DE III	OFFICE OF THE U	NIVERSITY REGISTRAR	13274.80	N/A	JOB ORDER	Υ
			fran	ontinue on separate shee					
SIGNA	ATURE		man		DATE		5/30/2023		

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT /	/ PEOPLE / VO	OLUNTARY O	RGANIZATIOI	V/S	
29. NAME & ADDRESS OF OF (Write in full)			/E DATES ld/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK
N/A		N/A	N/A	N/A		N/A
VII. LEARNING AND DEVELOPMENT (L&D)		tinue on separate				
TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)	RVENTIONS/TRAINING PROGRAMS	INCLUSIVE ATTEN (mm/d	DATES OF DANCE d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ CONDUCTED/ SPONSORED BY Supervisory/ Technicaltet)	
PURCHASE REQUEST (PR) MODULE OF THE SUPPLY MANAGEMENT INFORMATION SYSTEMS (SPPMIS)	PROPERTIES PROCUREMENT	From 28/08/2020	To 28/08/2020	4		VSU SPPMIS
DOCUMENT TRACKING SYSTEMS		13/11/2020	13/11/2020	3		VSU HRIS
	(Con	tinue on separate	sheet if necessary)			
VIII. OTHER INFORMATION						
31. SPECIAL SKILLS and HOBBIES	32. NON-	-ACADEMIC DISTIN (Write	ICTIONS / RECOG e in full)	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
EVALUATION		N/A				Philippine Association of Agriculturist
READING/WRITING						
COMMUNICATION						
ICT Skills						
		,				
SIGNATURE	faria	tinue on separate	sneet if necessary)		ATE	5/30/2023

34.	Are you related by consanguinity or affinity to the appointing or chief of bureau or office or to the person who has immediate a Bureau or Department where you will be apppointed, a. within the third degree?	□YES ☑NO				
	b. within the fourth degree (for Local Government Unit - Cared	☐ YES ☑ NO If YES, give details:				
35.	a. Have you ever been found guilty of any administrative offer	☐YES ☑NO If YES, give details:				
	b. Have you been criminally charged before any court?	☐ 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 any court or tribunal?	☐YES ☑NO If YES, give details:				
	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fin in the public or private sector?	ished contract or phased out (abolition)	YES If YES, give details	☑NO		
38.	a. Have you ever been a candidate in a national or local elect Barangay election)?	tion held within the last year (except	☐YES If YES, give deta	☑NO ils:		
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local of	☐YES If YES, give deta	√ NO			
39.	Have you acquired the status of an immigrant or permanent re	☐YES ☑NO If YES, give details (country):				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magrand (c) Solo Parents Welfare Act of 2000 (RA 8972), please a	na Carta for Disabled Persons (RA 7277); answer the following items:				
a.	Are you a member of any indigenous group?	☐YES ☑NO If YES, please specify:				
b.	Are you a person with disability?	YES ✓ NO If YES, please specify ID No:				
C.	Are you a solo parent?	☐ YES ☑ NO If YES, please specify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)				
	NAME	ADDRESS	TEL. NO.			
	RENATO A. MAALA	BAYBAY CITY, LEYTE	9606090137	(a) (b)		
	NORMA O. VILLAS	VISCA, BAYBAY CITY, LEYTE	9061023570			
- 10	LOUISA MARIE B. ANDRADE	STA. CRUZ, BAYBAY CITY, LEYTE	563-7527			
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 representagree that any misrepresentation made in this document administrative/criminal case/s against me.	ent laws, rules and regulations of the I ntative to verify/validate the contents state	Republic of the ed herein.	РНОТО		
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance					
	overnment Issued ID: PRC ID	franca		F 2 10 8 10 8		
IC	//License/Passport No.: 0031921	ox)				
D	ate/Place of Issuance: PRC ORMOC		Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	, affiant exhibi	ting his/her validly issue	d government ID as indicated above.		
		Person Administering Oatl	1			