

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	TAGACTAC		
FIRST NAME	WINNA	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	ANTONIANO		
3. DATE OF BIRTH (mm/dd/yyyy)	1/1/1999	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	HILONGOS	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	PUROK 2 House/Block/Lot No. Street GABAS Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.49	ZIP CODE	
8. WEIGHT (kg)	43		
9. BLOOD TYPE	N/A		
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	121278556727	18. PERMANENT ADDRESS	ZONE 3 House/Block/Lot No. Street DOOS DEL NORTE Subdivision/Village Barangay HINDANG LEYTE City/Municipality Province
12. PHILHEALTH NO.	01-250414390-0	ZIP CODE	6523
13. SSS NO.	35-0083057-3	19. TELEPHONE NO.	N/A
14. TIN NO.	778-939-915-000	20. MOBILE NO.	0919-318-5653
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	winnatagactac@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	N/A	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	TAGACTAC			
FIRST NAME	BALDWIN	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	ALQUEZA			
25. MOTHER'S MAIDEN NAME				
SURNAME	ANTONIANO			
FIRST NAME	GINA			
MIDDLE NAME	RUBA			

(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	DOOS DEL NORTE ELEMENTARY SCHOOL	N/A	2005	2011	N/A	2011	2nd Honorable Mention
SECONDARY	SAINT MICHAEL COLLEGE UNIVERSITY OF MAKATI- (SENIOR HIGHSCHOOL)	HUMANITIES AND SOCIAL SCIENCES	2011 2015	2015 2017	N/A	2015 2017	2nd Honorable Mention
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	UNIVERSITY OF MAKATI	BACHELOR OF SCIENCE IN BUSINESS ADMINISTRATION MAJOR IN SUPPLY CHAIN MANAGEMENT	2017	2021	N/A	2021	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	09/25/24
-----------	---	------	----------

IV. CIVIL SERVICE ELIGIBILITY						
27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	CSC-SUBPROFESSIONAL	81.37	8/20/2023	SAINT JOSEPH COLLEGE, MAASIN CITY		
	CSC-PROFESSIONAL	81.05	3/3/2024	NEW ORMOC CITY NATIONAL HIGH SCHOOL, ORMOC CITY		

## V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

SIGNATURE		DATE	09/25/24
-----------	---	------	----------

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	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

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			
	Lean Six Sigma White Belt Training	October 16, 2020	October 16, 2020	4	Business Methodologies and Processes	Ryan Gan
	ISO 9001:2015 Awareness Webinar	September 13, 2021	September 13, 2021	5	ISO	Visayas State University
	Eastern Visayas Project Monitoring System (EV-PMS)	March 02, 2022	March 02, 2022	8	Technical	Atty. Bonifacio G. Uy
	Advanced Microsoft Excel Functions and Shortcuts for Financial Transaction Processing and reporting Workshop	November 28, 2023	November 28, 2023	5	Clerical	Visayas State University
	Unlocking Excellence: The 5S Revolution for Clerks and Heads	November 29, 2023	November 29, 2023	5	Clerical	Visayas State University
	Orientation of Guidelines and Procedures on Processes/Services of the Offices under Administrative Services Office	February 23, 2024	February 23, 2024	8	Clerical	Visayas State University
	Financial Transaction Forum	March 20, 2024	March 20, 2024	8	Clerical	Visayas State University
	Shaping Culture:Embracing Values for Productive Workplace Performance	May 15, 2024	May 15, 2024	8	Clerical	Visayas State University
	Basic Records and Archives Management	July 30, 2024	July 31, 2024	16	Clerical/Managerial	National Archive of the Philippines
	ISO 9001:2015 AWARENESS & RE-AWARENESS SEMINAR	September 9, 2024	September 9, 2024	4	ISO	VSU- Quality Assurance Center
	Public Financial Management Workshop	September 18, 2024	September 20, 2024	24	Clerical/Managerial	Department of Budget and Management RO VIII

(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)
	Adaptability		N/A		N/A
	Interpersonal Skills				
	Computer Skills				
	Organizing				
	Outdoor activities				
	Travelling				
	Dance				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	09/25/24
-----------	---	------	----------

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

☐ YES

☐ NO

If YES, give details:

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:

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.
Mona Nena B. Geraldo	Budget Office- VSU Main	0935-946-8586
Alicia M. Flores	Budget Office- VSU Main	+63 53 565 0600 local 1009
Tiffany P. Baguio	VICARP-VSU	0963-265-6467

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: 6058-2963-4278-4362

ID/License/Passport No.:

Date/Place of Issuance: PSA. 11/07/2021

Signature (Sign inside the box)

09/25/24

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this **SEPT. 25, 2024**, affiant exhibiting his/her validly issued government ID as indicated above.

ATY **PAUL C. GUINOCOR**  
VSU Legal Office

Person Administering Oath

CS FORM 212 (Revised 2017), Page 4 of 4