

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	VELASCO		
FIRST NAME	LIZA	NAME EXTENSION (JR., SR)	NONE
MIDDLE NAME	ALBISA		
3. DATE OF BIRTH (mm/dd/yyyy)	OCTOBER 29, 1983	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input checked="" type="checkbox"/> by naturalization Pts. indicate country.
4. PLACE OF BIRTH	DASMARIÑAS, CAVITE	If holder of dual citizenship, please indicate the details.	Philippines
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6. CIVIL STATUS	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input checked="" type="checkbox"/> Other/s: SOLO PARENT	17. RESIDENTIAL ADDRESS	APARTMENT 46 KILBOURNE DRIVE House/Block/Lot No. Street VSCA PANGASUGAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.40 m	ZIP CODE	6521
8. WEIGHT (kg)	57.0 kg	18. PERMANENT ADDRESS	House/Block/Lot No. Villa Inside Subdivision/Village Barangay MacArthur LEYTE City/Municipality Province
9. BLOOD TYPE	O+	ZIP CODE	
10. GSIS ID NO.	N/A	19. TELEPHONE NO.	NONE
11. PAG-IBIG ID NO.	1210-5038-8551	20. MOBILE NO.	09465999140
12. PHILHEALTH NO.	07-025343722-5	21. E-MAIL ADDRESS (if any)	liza.velasco@vsu.edu.ph
13. SSS NO.	34-0958073-3		
14. TIN NO.	426-693-515-000		
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	N/A	NAME EXTENSION (JR., SR)	1. Jorven A. Velasco	9/4/2003
MIDDLE NAME	N/A		2. Bench Justine A. Velasco	1/26/2006
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	Illegitimate			
FIRST NAME	N/A	NAME EXTENSION (JR., SR)		
MIDDLE NAME	N/A			
25. MOTHER'S MAIDEN NAME				
SURNAME	ALBISA			
FIRST NAME	YOLANDA			
MIDDLE NAME			(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	DANAO ELEMENTARY SCHOOL	PRIMARY	6/1/1991	3/1/1996	N/A	1996	VALEDICTORIAN
SECONDARY	MACARTHUR NATIONAL HIGH SCHOOL	SECONDARY	6/1/2007	3/1/2001	N/A	2001	HONORABLE MENTION
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY EDUCATION	6/1/2015	6/1/2019	N/A	2019	NONE
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	Masters in Tropical Ecology	8/1/2020	12/1/2020	6	N/A	N/A

(Continue on separate sheet if necessary)

[illegible]

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

[illegible]

V. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

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

[illegible]

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

[illegible]

34. Are you related by consanguinity or affinity to the appointing or recommending authority, chief of bureau or office or to the person who has immediate supervision over you in the 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
If YES, give details: _____

☐ 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 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
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: _____

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41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	CONTACT NO.
Prof. Rosa Ophelia D. Velarde	Apt.45 Kilbourne Drive VSU Baybay City	9773873556
Dr. Lijueraj J. Cuadra	Apt.62 Kilbourne Drive VSU Baybay City	9567922509
Prof. Jacob Glenn F. Jansalin	Apt.46 Kilbourne Drive VSU Baybay City	9614645485

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: PRC

ID/License/Passport No.: 1800277

Date/Place of Issuance: 12/11/2019 PRC ROBINSONS ORMOC

Signature (Sign inside the box)

Date Accomplished

Right Thumbmark

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