

# 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 ( ) ☐ d 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	PALERMO		
FIRST NAME	VICTORIA	NAME EXTENSION (JR., SR) NA	
MIDDLE NAME	GASES		
3. DATE OF BIRTH (mm/dd/yyyy)	7/21/1957	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	ANAHAWAN SO. LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6. CIVIL STATUS	<input type="checkbox"/> Single <input type="checkbox"/> Married <input checked="" type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	NA House/Block/Lot No. Street CENTRO CANDADAM Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province ZIP CODE 6521
7. HEIGHT (m)	1.53M	18. PERMANENT ADDRESS	NA House/Block/Lot No. Street CENTRO CANDADAM Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province ZIP CODE 6521
8. WEIGHT (kg)	51KG		
9. BLOOD TYPE	O'		
10. GSIS ID NO.	57062102316		
11. PAG-IBIG ID NO.	1700-0029-0963		
12. PHILHEALTH NO.	13-000015543-9		
13. SSS NO.	06-2050366-0	19. TELEPHONE NO.	NA
14. TIN NO.	179-966-337	20. MOBILE NO.	09167554913
15. AGENCY EMPLOYEE NO.	NA	21. E-MAIL ADDRESS (if any)	<a href="mailto:vgpalermo@gmail.com">vgpalermo@gmail.com</a>

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	PALERMO		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ANTONIO	NA	LADY FATIMA P. FINDLEY	17/04/1984
MIDDLE NAME	MORALES		LADIE ANNE P. CONDE	20/10/1987
OCCUPATION			CHRISTIAN ANTHONY G. PALERMO	18/05/1989
EMPLOYER/BUSINESS NAME	DECEASED			
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	GASES			
FIRST NAME	CEFERINO	NA		
MIDDLE NAME	PATUAL			
25. MOTHER'S MAIDEN NAME				
SURNAME	LAMORIDAN			
FIRST NAME	LEONCIA			
MIDDLE NAME	CARCASONA		(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	ANAHAWAN ELEMENTARY SCHOOL	ELEMENTARY			GRADUATED	1970	NA
SECONDARY	SAINT ANTHONY HIGH SCHOOL	SECONDARY			GRADUATED	1974	NA
VOCATIONAL / TRADE COURSE	BONTOC NATIONAL AGRICULTURAL AND FISHERIES SCHOOL	AGRI-TECH			GRADUATED	1977	NA
COLLEGE							
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	07/21/2025
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#### 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
	Licensed Agriculturist without Examination	NA	25/11/2015	PROFESSIONAL REGULATION COMMISSION Tacloban Office	0023324	7-25-2
	Certificate Holder, National Certificate III "Agricultural Crops Production" given by TESDA	NA	25/07/2015	TESDA, Department of Labor and Employment	150802030 06178	7-25-20
	Licensed Professional Teacher	77.3	30/05/1993	NATIONAL BOARD FOR TEACHER, Tacloban City	93268048P	27/09/1993
	Passed Career Professional Examination	81.8	8/12/1991	CIVIL SERVICE COMISSIOM REGION 8, Tacloban City	08-150122- 002	7-17-1992
	Passed Career Sub-Professional Examination	70.4	20/11/1987	CIVIL SERVICE COMISSIOM REGION 8, Tacloban City	242186-77	3-231-197 8

(Continue on separate sheet if necessary)

## V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	07/21/25
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29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	Research Adviser of Elementary and High School	1999-2000, 2001-2002	and 2019-2020		Research Adviser

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







	INCLUSIVE DATES OF			
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[illegible]

## VIII. OTHER INFORMATION


31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	• Proficient in MS Office		Best Research Assistant Award from Leyte State University 2002		Brotherhood of Christian Bussinessman and Professional
	Cooking epecially preparation of culture media				
					Baybay Immaculate Conception Lectors and Psalmists
					Cluster Leader of Brotherhood Eccleselial Community (BEC Candadam San Isidro

SIGNATURE		DATE	07/21/25
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<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>														
<p>35. a. Have you ever been found guilty of any administrative offense?</p>  <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <hr/> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">Status of Case/s: _____</p>														
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>														
<p>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?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>														
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>														
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>														
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES      <input type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>														
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><b>Elvira Oclarit</b></td> <td style="text-align: center;"><b>DPM, VSU</b></td> <td style="text-align: center;"><b>NA</b></td> </tr> <tr> <td style="text-align: center;"><b>Robelyn Piamonte</b></td> <td style="text-align: center;"><b>DPM, VSU</b></td> <td style="text-align: center;"><b>NA</b></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	<b>Elvira Oclarit</b>	<b>DPM, VSU</b>	<b>NA</b>	<b>Robelyn Piamonte</b>	<b>DPM, VSU</b>	<b>NA</b>					
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<p>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.</p>															
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<p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; width: 300px; height: 60px; margin: 10px auto;"></div> <div style="border: 1px solid black; width: 300px; height: 20px; margin: 10px auto; text-align: center;">         Person Administering Oath       </div>															