

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	SUDARIA		
FIRST NAME	KERRY	NAME EXTENSION (JR., SR)	
MIDDLE NAME	UY		
3. DATE OF BIRTH (mm/dd/yyyy)	13/03/1994	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	BAYBAY CITY, LEYTE	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 checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	ZONE 5 House/Block/Lot No. Street BRGY GUADALUPE Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.6	ZIP CODE	6521
8. WEIGHT (kg)	47.5		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	ZONE 5 House/Block/Lot No. Street BRGY GUADALUPE Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
10. GSIS ID NO.	2005985482	ZIP CODE	6521
11. PAG-IBIG ID NO.	1211-6842-7116		
12. PHILHEALTH NO.	13-050183761-0	19. TELEPHONE NO.	NA
13. SSS NO.	34-5862179-5	20. MOBILE NO.	09286854901
14. TIN NO.	330-296-717	21. E-MAIL ADDRESS (if any)	kerryuy@gmail.com
15. AGENCY EMPLOYEE NO.			

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	SUDARIA		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	LETUZ	NAME EXTENSION (JR., SR)	NA	
MIDDLE NAME	MAUSISA			
OCCUPATION	SCIENCE RESEARCH SPECIALIST I			
EMPLOYER/BUSINESS NAME	DA - PHILIPPINE CARABAO CENTER @ VSU			
BUSINESS ADDRESS	VISCA, BAYBAY CITY, LEYTE			
TELEPHONE NO.	NA			
24. FATHER'S SURNAME	UY			
FIRST NAME	ROE	NAME EXTENSION (JR., SR)		
MIDDLE NAME	YU			
25. MOTHER'S MAIDEN NAME				
SURNAME	BALILI			
FIRST NAME	NIDA			
MIDDLE NAME	RAPAS		(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	GRACE CHRISTIAN SCHOOL	PRIMARY EDUCATION	2001	2007	GRADUATED	2007	WITH HONORS
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	HIGH SCHOOL	2007	2011	GRADUATED	2011	WITH HONORS
VOCATIONAL / TRADE COURSE							
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRIBUSINESS	2011	2015	GRADUATED	2015	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF MANAGEMENT IN AGRIBUSINESS MANAGEMENT	2017	2019	GRADUATED	2019	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	November 24, 2023
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[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

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

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/24/2023
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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		
NA				

(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			
CASA BOOKKEEPER TRAINING	09/27/2023	9/29/2023	24 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES
LEAP: CARD AND ATM OPERATIONS	05/13/2022	05/13/2022	4 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES
LEAP: CREDIT CARD OPERATIONS	05/13/2022	05/13/2022	6 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES
LEAP: ELECTRONIC PRODUCTS AND SERVICES	05/13/2022	05/13/2022	5 HOURS	FOUNDATION	LANDBANK OF THE PHILIPPINES
PAYOUT OF VARIOUS FINANCIAL ASSISTANCE	03/14/2022	03/14/2022	3 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES
REMITTANCE OPERATIONS	03/11/2022	03/11/2022	3 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES
ATM OPERATIONS, BALANCING & RECONCILIATION, & MOBILE BRANCHES	03/11/2022	03/11/2022	5 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES
CLEARING OPERATIONS	03/10/2022	03/10/2022	5 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES
BRANCH ACCOUNTING PROCESSES	03/10/2022	03/10/2022	4 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES
ELECTRONIC SALARY LOAN (ESL) SYSTEM	03/09/2022	03/09/2022	5 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES
MODIFIED DISTBURSEMENT SCHEME SYSTEM	03/09/2022	03/09/2022	3 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES
SYSTEMATICS AND CONSUMER TRANSACTION SYSTEMS	03/08/2022	03/08/2022	7 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES
CARD AND ELECTRONIC PRODUCTS	03/07/2022	03/07/2022	4 HOURS	FOUNDATION	LANDBANK OF THE PHILIPPINES
RECORDS MANAGEMENT AND ENVIRONMENTAL MANAGEMENT	03/07/2022	03/07/2022	3.5 HOURS	MANAGERIAL	LANDBANK OF THE PHILIPPINES
LANDBANK'S RISK MANAGEMENT FRAMEWORK	03/04/2022	03/04/2022	9 HOURS	FOUNDATION	LANDBANK OF THE PHILIPPINES
TAKE THE L.E.A.D. IN CUSTOMER SERVICE	03/03/2022	03/03/2022	4 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES
VALUES INTEGRATION PROGRAM	03/03/2022	03/03/2022	4 HOURS	FOUNDATION	LANDBANK OF THE PHILIPPINES
BRANCH OPERATIONS	12/06/2021	12/07/2021	16 HOURS	MANAGERIAL	LANDBANK OF THE PHILIPPINES
BANK FRAUDS AND FORGERY DETECTION	12/03/2021	12/03/2021	8 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES
ANTI-MONEY LAUNDERING ACT	12/02/2021	12/02/2021	4 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES
COUNTERFEIT DETECTION	12/02/2021	12/02/2021	3 HOURS	TECHNICAL	LANDBANK OF THE PHILIPPINES

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

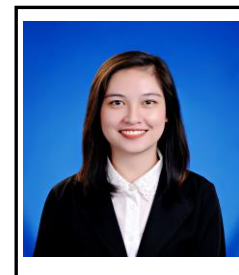
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Teller	NA	Landbank of the Philippines Employees Association
Computer Literate (MS Word, Powerpoint, Excel)		Society of Agrcultural Educators in Region 8, Inc. (SAER 8)
Reading		Society of Agribusiness Students (SABS)
Painting		
Record Keeping		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/24/2023
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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)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____ finished contract
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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
ANALITA A. SALABAO	Visca, Baybay City, Leyte	9235191103
REYNALDO T. OBINA	Mahaplag, Leyte	9176882011
MARY ANN B. PETEROS	Inopacan, Leyte	9756400326
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:	PhilHealth ID
ID/License/Passport No.:	13-050183761-0
Date/Place of Issuance:	Baybay City, Leyte

Signature (Sign inside the box)	
November 24, 2023	
Date Accomplished	

Right Thumbmark

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

Person Administering Oath