

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	Seville			
FIRST NAME	Marily	NAME EXTENSION (JR., SR)	N/A	
MIDDLE NAME	Villacorte			
3. DATE OF BIRTH (mm/dd/yyyy)	12/8/1980	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input checked="" type="checkbox"/> by naturalization Pls. indicate country:	
4. PLACE OF BIRTH	Baybay, 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 checked="" type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	Claro M. Recto Street	
7. HEIGHT (m)	1.52		House/Block/Lot No.	Street
8. WEIGHT (kg)	45		Zone 20	Bartolome Bartolini
9. BLOOD TYPE	O		Subdivision/Village	Barangay
10. GSIS ID NO.	N/A		Baybay City	Leyte
11. PAG-IBIG ID NO.	1211-8489-5963	City/Municipality	Province	
12. PHILHEALTH NO.	03-050900299-8	ZIP CODE		
13. SSS NO.	06-2338630-5	18. PERMANENT ADDRESS	Claro M. Recto Street	
14. TIN NO.	435-387-365	House/Block/Lot No.	Street	
15. AGENCY EMPLOYEE NO.	N/A	Zone 20	Bartolome Bartolini	
		Subdivision/Village	Barangay	
		Baybay City	Leyte	
		City/Municipality	Province	
		ZIP CODE	6521	
19. TELEPHONE NO.	N/A			
20. MOBILE NO.	0909 - 882- 1360			
21. E-MAIL ADDRESS (if any)	mharimar1019@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)	Anmari Joyce V. Seville
MIDDLE NAME	N/A		Marian Joy v. Seville
OCCUPATION	N/A		
EMPLOYER/BUSINESS NAME	N/A		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	N/A		
24. FATHER'S SURNAME	Villacorte (Deceased)		
FIRST NAME	Antonio	NAME EXTENSION (JR., SR)	
MIDDLE NAME	Braga		
25. MOTHER'S MAIDEN NAME			
SURNAME	Laurente		
FIRST NAME	Lilia		
MIDDLE NAME	Quinte		
(Continue on separate sheet if necessary)			

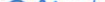
III. EDUCATIONAL BACKGROUND								
26.	LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
				From	To			
	ELEMENTARY	Carlos P. Garcia Elem. School	N/A	1986	1993	N/A	1993	1st Honorable Mention
	SECONDARY	Baybay National High School	N/A	1993	1997	N/A	1997	
	VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	
	COLLEGE	Leyte State University (presently Visayas State University	BS in Agriculture major in Ag. Econ.	1997	2002	N/A	2002	Academic B Grant
	GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	2/19/2021

[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]

SIGNATURE		DATE	2/19/2021
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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		
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

(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			
	30th Joint ViCARP and RRDEN Symposium	11/21/2018	11/23/2018	24		VSU / DA - RFO 8
	Workshop on Participatory Assessment of the Gains, Challenges and Opportunities in Piloting Effective Models of ISARD	11/19/2018	11/20/2018	16		The Southeast Asian Regional Center for Grad. Studies and Research in Agriculture
	Fruit Trees Establishment and Validation of Farms	10/26/2018	10/26/2018	8		VSU - DoH
	Training Course on Research and Development (R&D) Project Implementation Management	9/4/2018	9/7/2018	32		VSU - OVPRE
	Development of a Seasonal Precipitation Forecast for Region VIII, Eastern Visayas	8/31/2018	8/31/2018	8		Artur Kauter of Technische Hochschule Koln, Germany
	Identification and Tagging of Baybay Tall Coconut Varieties	7/19/2018	7/19/2018	8		VSU / PCA
	Ecological Research: Methods and Data Analysis	7/6/2018	7/6/2018	8		VSU - OVPRE
	Seed Production and Conservation	12/6/2017	12/7/2017	16		DA - AES / UPLB

(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)
	Basic Computer Operations		N/A		Christian Young Adult Fellowship (CYAF)
	Geotagging				Baybay Women's Association
	Sewing				Gamma Pi Epsilon
	Listening to music				Visayas State University Credit Coop. (VSUCC)

(Continue on separate sheet if necessary)

SIGNATURE		DATE	2/19/2021
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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 checked="" 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: _____ Resignation from service
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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, please specify ID No: _____ For process
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME		ADDRESS
Jose L. Bacusmo		VSU-OVPRE, Visca, Baybay City, Leyte
Rolando B. Hipe		DA-RFO8, Kanhuraw Hills, Tacloban City
Carmelita C. Tito		Brgy. Captain, Zone 20, Baybay City, Leyte
TEL. NO.		
0928 349 6536		
0906 258 9185		
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.		
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) ID Number and Date of Issuance Government Issued ID: 06-2338630-5 ID/License/Passport No.: Date/Place of Issuance:		Signature (Sign inside the box) Date Accomplished
PLEASE INDICATE 2/19/2021		
		Right Thumbmark
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.		
Person Administering Oath		



PHOTO