PERSONAL DATA SHEET

| READ THE ATTACHED GUIDE T | on made in the Personal Data Sheet and the war of the William of the William Office and the William of the William Office of the Wil | T (PDS) BEFORE ACCOMPL | ISHING THE P | | 1. CS ID No. | | | For CSC use only | |
|----------------------------------|--|---|--|--|-------------------|--|-------------------|---------------------|--|
| I. PERSONAL INFORMATION | and use separate sheet if necessary. Indicate N/A | If flot applicable. DO NOT ABB | REVIALE. | | I. CSID NO. | | (Do not in up. | r di coc use diliy, | |
| 2. SURNAME | DE GUZMAN | | | | | | | | |
| | | | | | | | A4.7.1.3.2 | | |
| FIRST NAME | MANUEL | | | | | JR. | | | |
| MIDDLE NAME | JATAYNA | | | , | | | | | |
| 3. DATE OF BIRTH (mm/dd/yyyy) | JANUARY 03, 1999 POBLACION, SAN JOSE, SURIGAO DEL | 16. CITIZENSHIP | | | | | | | |
| 4. PLACE OF BIRTH | NORTE If holder of dual citizen | | | | | | ountry: | | |
| 5. SEX | ■ Male | please indicate the de | tals. | Philippines | | | | - | |
| 6 CML STATUS | ■ Single ■ Married ■ Widowed ■ Separated ■ Other/s: | 17. RESIDENTIAL ADDRESS | House/Block/Lot No. Subdivision/Village | | | PUROK 1 Street POBLACION Barangay | | | |
| 7. HEIGHT (m) | 1.70m | | | SAN JOSE DINAGAT ISLANDS | | | | | |
| 8. WEIGHT (kg) | 70 KGS. ZP CODE | | City/Municipality Province 8427 | | | | | | |
| 9. BLOOD TYPE | | 18. PERMANENT ADDRESS | Hou | House/Block/Lat No. | | PUROK 1 Streat | | | |
| 10. GSIS ID NO. | N/A | | | POB | | | | DBLACION | |
| 11. PAG-IBIG ID NO. | 1212-9027-1543 | | | Subdivision/Village Barangay SAN JOSE DINAGAT ISLANDS City/Municipality Province | | | | | |
| 12. PHILHEALTH NO. | | ZP CODE | | S427 | | | | | |
| 13. SSS NO. | | 19. TELEPHONE NO. | N/A | | N/A | | | | |
| 14. TIN NO. | 765-375-666-000 20. MOBILE NO. | | | 0951-375-0547 | | | | | |
| 15. AGENCY EMPLOYEE NO. | | 21. E-MAIL ADDRESS (if any) | | deguzmanm67@gmail.com | | | | | |
| II. FAMILY BACKGROUND | | | | | - | | | | |
| 22. SPOUSE'S SURNAME | the second of the second | | 23. NAME of CHI | LDREN (Write: | full name and lis | tal) | DATE OF BIR | TH (mm/dd/yyyy) | |
| FIRST NAME | | NAME EXTENSION (JR., SR) | | | | | | | |
| MIDDLE NAME | | | | | | - | | | |
| OCCUPATION | | | | | | | | | |
| EMPLOYER/BUSINESS NAME | | | | | | | | | |
| BUSINESS ADDRESS | | | | | | | | | |
| TELEPHONE NO. | | | | | | | | | |
| 24. FATHER'S SURNAME | DE GUZMAN | | | | | | | | |
| FIRST NAME | | SR. | | | | | | | |
| MIDDLE NAME | ALDEVERA | 1 | | | | | | | |
| 25. MOTHER'S MAIDEN NAME | EDILLOR | | | | | | | | |
| SURNAME | DE GUZMAN | | - | | | | | | |
| FIRST NAME | EULENE | | | | | | | | |
| MIDDLE NAME | JATAYNA | | | | | | | | |
| III. EDUCATIONAL BACKGRO | | | | (6 | ontinue on set | parate sheet if necess | ary) | | |
| | | | | | | | | SCHOLARSHIP/ | |
| 26. LEVEL | NAME OF SCHOOL (Write in full) | BASIC EDUCATION/DEGREE (Write in full) | E/COURSE | PERIOD OF A | | HIGHEST LEVEL/ UNITS EARNED (if not graduated) | YEAR GRADUATED | ACADEMIC HONORS | |
| ELEMENTARY | SAN JOSE CENTRAL ELEMENTARY | ELEMENTARY EDUCA | ATION | From 2005 | To 2011 | | 2011 | RECEIVED | |
| SECONDARY | SCHOOL DON RUBEN EDERA ECLEO SR. MEMORIAL | | | 2011 | 2015 | | 2015 | | |
| VOCATIONAL/ | NATIONAL HIGH SCHOOL | | | 2011 | 2013 | | 2010 | | |
| TRADE COURSE COLLEGE | CENTRAL MINDANAO UNIVERSITY | TERTIARY EDUCAT | ION | 2045 | 2040 | | 2040 | | |
| | ZETTO E TANDONIAO VINTERON I | TERTIFAT EDUCAT | | 2015 | 2019 | | 2019 | | |
| GRADUATE STUDIES | (6 | ontinue on s <u>epar</u> ate sheet if neces | sarvi | | | | | | |
| SIGNATURE | 200 | b Q | | DA | TE | Dece | mber 13, 202 | 2 | |

| IV. CIVIL SE | RVICE ELIGIE | BILITY | | | | | | | |
|---|----------------|------------------------------|-----------------------|---|--|--|--------------------------|--------------------------|---|
| 27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL RATIN | | RATING | DATE OF EXAMINATION | | | | LICENSE (if applicable) | | |
| | | (If Applicable) | /CONFERMENT | PLACE OF EXAMINATION / CONFERMI | | MENT | NUMBER | Date of Validity | |
| LICENSURE EXAMINATION FOR AGRICULTURIST | | 81.83 | NOVEMBER 5-7, 2022 | CAPITOL UNIVERSITY, | CAGAYAN DI | E ORO CITY | 0036506 | 01/03/2023 | |
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| V. WORKE | (DEDIENCE | | (Co | ontinue on separate sheet | if necessary) | | | | |
| ENGLISHED STATES | | nt. Start from your recent v | vork) Description (| of duties should be in | dicated in the attached W | ork Experien | ce sheet. | | |
| 28. NCLUSIVE DATES (mm/dd/yyyy) POSITION TITLE (Write in full/Do notabb | | | | ENCY/OFFICE/COMPANY /Do notabbreviale) | MONTHLY SALARY | SALARY/ JOB/ PAY GRADE (ifapplicable)& STEP (Format*00-0*)/ INCREMENT | STATUS OF APPOINTMENT | GOVT SERVICE (Y/N) | |
| Apr 25, 2022 | | | DEPARTMEN TEC | 22,798.00 | | CONTRACT OF SERVICE | Υ | | |
| Feb 20, 2020 | April 24, 2022 | TECHNICAL S | STAFF | OFFICE OF | THE PROVINCIAL URIST-PLGU PDI | 8,800.00 | | JOB ORDER | Y |
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| | | | | ntinue on separate sheet | f necessary) | | | | |
| SIGNATURE | | gus Cu | est | DATE | | Decembe | r 13, 2022 | | |

| VI. VOLUNTARY WORK OR INVOLVEMENT IN | CIVIC / NON-GOVERNMENT / PE | EOPLE / VOLU | NTARY ORGA | NIZATION/S | | | |
|--|--------------------------------|------------------------------------|---------------------------------|---------------------|---|--|--|
| 29. NAME & ADDRESS OF ORGANIZATION (Write in full) | | | INCLUSIVE DATES (mm/dd/yyyy) | | POSITION / NATURE OF WORK | | |
| | | From | То | | | | |
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| VII. LEARNING AND DEVELOPMENT (L&D) IN | | iue on separate sh FRAMS ATTIEL | | | | | |
| (Start from the most recent L&Ditraining program and include | | | | Executive/Manageria | al positions) | | |
| 30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Within in full) | | (mm/c | G OF ATTENDANCE (d/yyyy) | NUMBER OF HOURS | Type of LD (Managerial/ Supervisory/ Technical/etc) | CONDUCTED/ SPONSORED BY (Write in full) | |
| Increasing Coconut Production: Collaboratin and | Proenecte | 10/27/2022 | To 10/27/2022 | 4 | Technical | College of Agriculture and Food Science, | |
| The Initiatives of Government Agencies Including Coconut Industry | | 10/25/2022 | 10/25/2022 | 4 | Technical | University of the Philippines, Los Baños College of Agriculture and Food Science, University of the Philippines, Los Baños | |
| Overview of the Coconut Industry | | 10/20/2022 | 10/20/2022 | 4 | Technical | College of Agriculture and Food Science, University of the Philippines, Los Baños | |
| Cassava Production: Highlighting UPLB-Develope | d Technologies | 06/03/2021 | 06/03/2021 | 4 | Technical | Agricultural Systems Institute, College of Agriculture and Food Science, UPLB | |
| Crops Diseases Beyond Boundaries: Know the tra (Cassava, Cacao, and Corn) | ansboundary Diseases of 3Cs | 05/26/2021 | 05/26/2021 | 4 | Technical | Agricultural Systems Institute, College of Agriculture and Food Science, UPLB | |
| Energy Sustainable Development: Breakthroughs Renewable Energy | , Application, and Safe use of | 05/22/2021 | 05/22/2022 | 4 | Technical | DOST-Philippines Institute of Chemical Engineers-Bataan Chapter | |
| SARAi E-skwela: Gabay sa Pagtatanim at Pangang | alaga ng Kamatis | 06/21/2020 | 06/21/2021 | 4 | Technical | UPLB In Partneship with DOST | |
| SARAi E-skwela: Coconut Good Agricultural Practices | | | 06/14/2021 | 4 | Technical | UPLB In Partneship with DOST | |
| The Sustainable Development Goals- A transdicip | linary vision for the Future | 06/09/2020 | 06/09/2020 | 4 | Technical | Univeristy of COPENHAGEN through DOST- COURSERA | |
| Understanding Plants II: Fundamentals of Plant B | iology | 09/28/2020 | 09/28/2021 | 4 | Technical | Tel Aviv University through DOST- COURSERA | |
| Transformation of the Global Food Systems | | 09/21/2020 | 09/21/2021 | 4 | Technical | Univeristy of COPENHAGEN through DOST- COURSERA | |
| SARAI E-skwela: Use of Weather Information and Monitoring | Drone Aerial Images for Crop | 09/16/2020 | 09/16/2021 | 4 | Technical | UPLB In Partneship with DOST | |
| Positive Psychology | | | 10/10/2020 | 4 | Technical | The University of North Carolina at Chapel Hill through DOST-COURSERA | |
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| | (Contin | ue on separate sh | eet if necessary) | | | | |
| VIII. OTHER INFORMATION | | | | | | | |
| SPECIAL SKILLS and HOBBIES | | NCTIONS / RECOGN e in full) | ITIÓN | | 33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full) | | |
| Can do well in MS Office Word, Excel, PowerPoint, and Publisher | | | | | | | |
| Can do well in Writing and Interpersonal Skills | | | | | | | |
| Personable Phone Manner | | | | | | | |
| Playing Volleyball | | - | 7 | | | | |
| Reading | | | | | | 7 | |
| Plant Disease Diagnosis | | | | | | | |
| Coping up with Stress | | | | | | | |
| , g - F | (Contin | ue on separate she | eet if necessary) | | | | |
| SIGNATURE | 20 die | shoot . | | DA | TE | December 13, 2022 CS FORM 212 (Revised 2017), Page 3 of 4 | |

| 34. | Are you related by consanguinity or affinity to the appointing or r chief of bureau or office or to the person who has immediate su | | | | | | |
|---------|--|---|---|---|--|--|--|
| | Bureau or Department where you will be apppointed, | 3.0 | | | | | |
| | a. within the third degree? | YES NO | | | | | |
| | b. within the fourth degree (for Local Government Unit - Career | ☐ YES ☐ NO If YES, give details: | | | | | |
| | | If YES, give details: | | | | | |
| 35. | a. Have you ever been found guilty of any administrative offense | 3.00 | | | | | |
| | | ☐ YES ☐ NO If YES, give details: | | | | | |
| | | | | _ | | | |
| | b. Have you been criminally charged before any court? | | ☐ 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 la | w, decree, ordinance or regulation by any | | _ | | | |
| 30. | court or tribunal? | | ☐ YES ☐ NO If YES, give details: | | | | |
| | | | ii 123, give details. | | | | |
| 37. | Have you ever been separated from the service in any of the fol | | ☑ YES □ NO | _ | | | |
| | dropped from the rolls, dismissal, termination, end of term, finish public or private sector? | ned contract or phased out (abolition) in the | ■ YES ■ NO If YES, give details: | | | | |
| | public of private sector? | | Finished contract | | | | |
| 38. | a. Have you ever been a candidate in a national or local election | held within the last year (except Barangay | E vec | | | | |
| | election)? | | ☐ YES If YES, give details: ■ NO | | | | |
| | b. Have you resigned from the government service during the the election to promote/actively campaign for a national or local can | | ☐ YES ☐ NO If YES, give details: | | | | |
| H | Have you acquired the status of an immigrant or permanent resi | | ii 120, give details. | | | | |
| 39. | rrave you acquired the status of all linking and or permanent resi | dent 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 (PA 7277): | | _ | | | |
| | and (c) Solo Parents Welfare Act of 2000 (RA 8972), please an | | | | | | |
| a. | Are you a member of any indigenous group? | | ☐ YES ☑ NO | | | | |
| | | | If YES, please specify: | | | | |
| b. | Are you a person with disability? | | If YES, please specify ID No. NO. | | | | |
| c. | Are you a solo parent? | | ☐ YES ☑ NO | | | | |
| | | | If YES, please specify ID No: | | | | |
| 41. | REFERENCES (Person not related by consanguinity or affinity to applicant /a | nnointeel | | _ | | | |
| - | NAME | ADDRESS | TEL NO. | | | | |
| L., | | | | | | | |
| In C | DN. JULMORE T. PESITO | P-7 POBLACION, SAN JOSE, PDI | 0917-677-7493 | | | | |
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| | | | | | | | |
| 42. | I declare under oath that I have personally accomplished this | Personal Data Sheet which is a true, corre | ect and complete | | | | |
| | statement pursuant to the provisions of pertinent laws, rules a | | 200000 | | | | |
| | the agency head/authorized representative to verify/validat misrepresentation made in this document and its attachments s | | agree that any MANUEL TR TOE CLARAN | | | | |
| | me. | | | | | | |
| G | overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) | | | | | | |
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| | SUBSCRIBED AND SWORN to before me this | , affiant exhibiti | ng his/her validly issued government ID as indicated above. | | | | |
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