

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 | ANDRADE | | |
| FIRST NAME | LOUISA MARIE | NAME EXTENSION (JR., SR) | |
| MIDDLE NAME | BONGCALES | | |
| 3. DATE OF BIRTH (mm/dd/yyyy) | 11/25/1991 | 16. CITIZENSHIP | <input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country: |
| 4. PLACE OF BIRTH | BAYBAY, LEYTE | If holder of dual citizenship, please indicate the details. | Philippines |
| 5. SEX | <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female | 17. RESIDENTIAL ADDRESS | 1240 House/Block/Lot No. Street GUADALUPE Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province |
| 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: | 18. PERMANENT ADDRESS | 1240 House/Block/Lot No. Street GUADALUPE Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province |
| 7. HEIGHT (m) | 158 m | 19. TELEPHONE NO. | N/A |
| 8. WEIGHT (kg) | 70 kg | 20. MOBILE NO. | +639060519933 |
| 9. BLOOD TYPE | A + | 21. E-MAIL ADDRESS (if any) | louisamariiebongcales@gmail.com |
| 10. GSIS ID NO. | 2004492222 | | |
| 11. PAG-IBIG ID NO. | 121159678522 | | |
| 12. PHILHEALTH NO. | 13-000114778-2 | | |
| 13. SSS NO. | N/A | | |
| 14. TIN NO. | 438-761-665 | | |
| 15. AGENCY EMPLOYEE NO. | V00882 | | |

II. FAMILY BACKGROUND

| | | | |
|--------------------------|---|---|----------------------------|
| 22. SPOUSE'S SURNAME | ANDRADE | 23. NAME of CHILDREN (Write full name and list all) | DATE OF BIRTH (mm/dd/yyyy) |
| FIRST NAME | BUEN JOSEF | NAME EXTENSION (JR., SR) | N/A |
| MIDDLE NAME | CA NILA | | |
| OCCUPATION | BROADCAST PROGRAM PRODUCER-ANNOUNCER II | | |
| EMPLOYER/BUSINESS NAME | VISAYAS STATE UNIVERSITY | | |
| BUSINESS ADDRESS | VISCA, BAYBAY CITY. LEYTE | | |
| TELEPHONE NO. | N/A | | |
| 24. FATHER'S SURNAME | BONGCALES | | |
| FIRST NAME | MARIO | NAME EXTENSION (JR., SR) | |
| MIDDLE NAME | MAGLINTE | | |
| 25. MOTHER'S MAIDEN NAME | | | |
| SURNAME | OBEÑA | | |
| FIRST NAME | EMMYLOU | | |
| MIDDLE NAME | COTONER | | |

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 | BUNGA ELEMENTARY SCHOOL | PRIMARY EDUCATION | 1998 | 2004 | GRADUATED | 2004 | VALENTINARIAN |
| SECONDARY | VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL | HIGH SCHOOL | 2004 | 2008 | GRADUATED | 2008 | |
| VOCATIONAL / TRADE COURSE | N/A | | | | | | |
| COLLEGE | VISAYAS STATE UNIVERSITY | BACHELOR OF ELEMENTARY EDUCATION | 2008 | 2012 | GRADUATED | 2012 | MAGNA CUM LAUDE |
| GRADUATE STUDIES | VISAYAS STATE UNIVERSITY | MASTER IN EDUCATION | 2012 | 2015 | GRADUATED | 2015 | |

| | | | |
|---|--|---|-----------------|
| (Continue on separate sheet if necessary) | | | |
| SIGNATURE | | DATE | August 31, 2017 |
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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 |
| | PD # 907 (HONOR GRADUATES) | | 4/10/2012 | VSU, VISCA BAYBAY CITY, LEYTE | 100108120209 | |
| | LICENSURE EXAMINATION FOR TEACHERS | 85.20 | 9/30/2013 | TACLOBAN CITY, LEYTE | 1173235 | ON PROTECTIVE AND DEFECTIVE LICENSE NOTIFIED |
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(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.

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(Continue on separate sheet if necessary)

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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 | | | | | |
| | | | | | |
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(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)

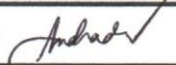
| 30 | TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full) | INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) | | NUMBER OF HOURS | Type of LD (Managerial/ Supervisory/ Technical/etc) | CONDUCTED/ SPONSORED BY (Write in full) |
|----|---|---|--------------|-----------------|---|---|
| | | From | To | | | |
| | Intensive Certificate Course in Teachingn English to Young Learners | 12/9/2016 | 12/10/2016 | 16 hrs. | Technical | University of San Jose-Recoletos, College of Education and Graduate of Education |
| | Trainings Workshop on Writing to Presenting Proposal towards Building Science Culture in the Eastern Visayas Region | 10 /1 /2015 | 10 /2 /2015 | 16 hrs. | Technical | National Academy of Science and technology Philippine Outsatanding Scientist Inc., Visayas State Univresity |
| | Interfacing Graduate School Researches in Asean 2015 Integration | 08/29/2015 | 08/29/2015 | 8 hrs. | Technical | Philippine Association for Graduate Eduaction Region VIII |
| | Oreintation Seminar of Newly- Hired Regular and Part-time Instructor | 06/08/2015 | 06/08/2015 | 8 hrs. | Technical | Visayas State University |
| | Regional Division Based Mass Trainings for Grade 4 Teacher in the k to 12 Basic Education | 05 /10 /2015 | 05 /10 /2015 | 56 hrs. | Technical | DEPED- Regional Office (Region VIII) |
| | Roll-out Training on Child Protection Policy (CPP) | 02/27/2015 | 02 /28 /2015 | 8 hrs. | Technical | DEPED- Baybay II District Baybay City, Leyte |
| | Roll-out Training on Child Protection Policy (CPP) | 03/07/2015 | 03/07/2015 | 8 hrs. | Technical | DEPED- Baybay II District Baybay City, Leyte |
| | Capability Building Program on Developing Small and Big Books for Kindergarten G1, G2, and G3 | 10 /21/2014 | 10 /23 /2015 | 24 hrs. | Technical | DEPED- Baybay II District Baybay City, Leyte |
| | Capability Building Program on Developing Small and Big Books for Kindergarten G1, G2, and G3 | 09 /12/2014 | 09/14/2015 | 24 hrs. | Technical | DEPED- Baybay City Division |
| | District Echo-Training Workshop on Damath and Sci- Drama | 09 /4 /2014 | 09 /4 /2014 | 8 hrs. | Technical | DEPED- Baybay II District Baybay City, Leyte |
| | 3-Day District Echo- Seminar of MAPEH Teachers on Content | 09/13 /2014 | 09/13 /2014 | 8 hrs. | Technical | DEPED- Baybay City Division and Baybay II District |
| | 3-Day District Echo- Seminar of MAPEH Teachers on Content | 09/06 /2014 | 09/06 /2014 | 8 hrs. | Technical | DEPED- Baybay City Division and Baybay II District |
| | 3-Day District Echo- Seminar of MAPEH Teachers on Content | 08 /30 /2014 | 08 /30 /2014 | 8 hrs. | Technical | DEPED- Baybay City Division and Baybay II District |
| | Education Summit | 05/ 29 /2014 | 05/ 29 /2014 | 8 hrs. | Technical | DEPED- Baybay City Division |
| | Regional Division Based Trainings for Grade 3 Teachers on K to 12 Basic Educational Program | 05 /12 /2014 | 05 /16 /2014 | 40 hrs. | Technical | DEPED- Regional Office (Region VIII) |
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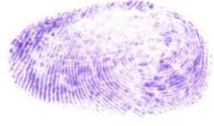
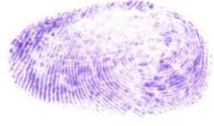
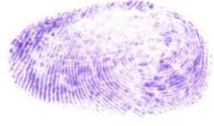



(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

| 31. | SPECIAL SKILLS and HOBBIES | 32. | NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) | 33. | MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full) |
|-----|----------------------------|-----|--|-----|---|
| | COMPUTER LITERATE | | N/A | | GAMMA EPSILON FRATERNITY/GAMMA LAMBDA EPSILON SORORITY |
| | BAKING | | | | |
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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: resignation from DepEd _____ | | | | | | | | | | | | | | | | | | |
| 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) | | | | | | | | | | | | | | | | | | | |
| <table><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr><tr><td>LIJUERAJ J. CUADRA</td><td>VSU, VISCA, BAYBAY CITY, LEYTE</td><td>563-7527</td></tr><tr><td>ROSARIO P. ABELA</td><td>VSU, VISCA, BAYBAY CITY, LEYTE</td><td>563-7528</td></tr><tr><td>BYRON S. BARREDO</td><td>VSU, VISCA, BAYBAY CITY, LEYTE</td><td>9272496712</td></tr></table> | | NAME | ADDRESS | TEL. NO. | LIJUERAJ J. CUADRA | VSU, VISCA, BAYBAY CITY, LEYTE | 563-7527 | ROSARIO P. ABELA | VSU, VISCA, BAYBAY CITY, LEYTE | 563-7528 | BYRON S. BARREDO | VSU, VISCA, BAYBAY CITY, LEYTE | 9272496712 | | | | | | |
| NAME | ADDRESS | TEL. NO. | | | | | | | | | | | | | | | | | |
| LIJUERAJ J. CUADRA | VSU, VISCA, BAYBAY CITY, LEYTE | 563-7527 | | | | | | | | | | | | | | | | | |
| ROSARIO P. ABELA | VSU, VISCA, BAYBAY CITY, LEYTE | 563-7528 | | | | | | | | | | | | | | | | | |
| BYRON S. BARREDO | VSU, VISCA, BAYBAY CITY, LEYTE | 9272496712 | | | | | | | | | | | | | | | | | |
| 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 cases against me. | | | | | | | | | | | | | | | | | | | |
| <table><tr><td colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td></tr><tr><td colspan="2">PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID:</td><td>TIN</td></tr><tr><td>ID/License/Passport No.:</td><td>438-761-645</td></tr><tr><td>Date/Place of Issuance:</td><td>08/16/13</td></tr></table> | Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) | | PLEASE INDICATE ID Number and Date of Issuance | | Government Issued ID: | TIN | ID/License/Passport No.: | 438-761-645 | Date/Place of Issuance: | 08/16/13 | <table><tr><td colspan="2"></td></tr><tr><td colspan="2">Signature (Sign inside the box)</td></tr><tr><td colspan="2">8/31/2017</td></tr><tr><td colspan="2">Date Accomplished</td></tr></table> |  | | Signature (Sign inside the box) | | 8/31/2017 | | Date Accomplished | |
| Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) | | | | | | | | | | | | | | | | | | | |
| PLEASE INDICATE ID Number and Date of Issuance | | | | | | | | | | | | | | | | | | | |
| Government Issued ID: | TIN | | | | | | | | | | | | | | | | | | |
| ID/License/Passport No.: | 438-761-645 | | | | | | | | | | | | | | | | | | |
| Date/Place of Issuance: | 08/16/13 | | | | | | | | | | | | | | | | | | |
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| Signature (Sign inside the box) | | | | | | | | | | | | | | | | | | | |
| 8/31/2017 | | | | | | | | | | | | | | | | | | | |
| Date Accomplished | | | | | | | | | | | | | | | | | | | |
| <table><tr><td></td></tr><tr><td>LOUISA MARIE B. ANDRADE</td></tr></table> | |  | LOUISA MARIE B. ANDRADE | | | | | | | | | | | | | | | | |
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| LOUISA MARIE B. ANDRADE | | | | | | | | | | | | | | | | | | | |
| <table><tr><td></td></tr><tr><td>Right Thumbmark</td></tr></table> | |  | Right Thumbmark | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| Right Thumbmark | | | | | | | | | | | | | | | | | | | |
| SUBSCRIBED AND SWORN to before me this <u>OCT 23 2017</u> , affiant exhibiting his/her validly issued government ID as indicated above. | | | | | | | | | | | | | | | | | | | |
| <table><tr><td colspan="2"></td></tr><tr><td colspan="2">ATTY. RYSA C. GUINOCOR</td></tr><tr><td colspan="2">Person Administering Oath</td></tr></table> | |  | | ATTY. RYSA C. GUINOCOR | | Person Administering Oath | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| ATTY. RYSA C. GUINOCOR | | | | | | | | | | | | | | | | | | | |
| Person Administering Oath | | | | | | | | | | | | | | | | | | | |

WORK EXPERIENCE SHEET

Instructions: 1. Includes only the work experiences relevant to the position being applied to.
 2. The duration should include start and finish dates, if known, month in abbreviation form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

Position Applied:

INSTRUCTOR I

• Duration:

JUNE 2015 - PRESENT

• Position:

INSTRUCTOR I

• Name of Office/Unit:

DTE

• Immediate Supervisor:

LIJUELA J. CUADRA

• Name of Agency/Organization and Location:

VSU, BAYBAY CITY, LEYTE

• List of Accomplishments and Contributions (if any)

- Taught assigned subjects, prepared and revised teaching materials, made and checked test papers, and submitted grades
- Prepared research proposals and performed other functions such as coordinator of student teaching program and facilitator during the first Regional Education Students Conference

• Summary of Actual Duties

- Teaches assigned subjects and performed other related functions; performs research and/or extension functions; performs functions relative to committee memberships including related to quality assurance and other accreditation functions; performs other functions assigned by the dept. head and dean

• Duration:

NOVEMBER 2013 - JUNE 2015

• Position:

TEACHER I

• Name of Office/Unit:

MATAM-15 ES

• Immediate Supervisor:

PAMELA VALMORIDA

• Name of Agency/Organization and Location:

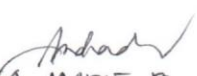
DEPED-BAYBAY CITY DIVISION, BAYBAY CITY, LEYTE

• List of Accomplishments and Contributions (if any)

- Developed lessons in a multigrade class, prepared and revised teaching materials, made and checked test papers, submitted grades, and prepared school forms and other school reports

• Summary of Actual Duties

- Responsible for the learning of grades 3 and 4 pupils; preparation of school forms and other school reports; preparation of classroom; Performs other functions assigned by the school head, district principal, education program supervisors, and schools division superintendent.


 LOUISA MARIE B. ANDRADE

 Signature over Printed Name
 of Employee/Applicant

Date:

10 - 10 - 17