## PERSONAL DATA SHEET

WARNING: Any misinterpretati concerned.	ion made in the Personal Data Sheet and the l	Work Experience Sheet shall cause	e the filing of admir	nistrative/cr	iminal case/s aga	ninst the pers	eon		
READ THE ATTACHED GUIDE	TO FILLING OUT THE PERSONAL DATA SHE	ET (PDS) BEFORE ACCOMPLISHI // A if not applicable. DO NOT ABBREVI	NG THE PDS FORM	1. CS ID No.		(Do not fill up. Fo	or CSC use only)		
I. PERSONAL INFORMATIO									
2. SURNAME	Alde								
FIRST NAME	Mannylen								
MIDDLE NAME	Coles						SANSHIES STATE		
3. DATE OF BIRTH									
(mm/dd/yyyy)	11/8/1990	16. CITIZENSHIP	✓ Filipino			Dual Citizenship by birth by naturalization			
4. PLACE OF BIRTH	Borongan Eastern Samar	If holder of dual citizenship, please indicate the details.	dails.		Pls. indicate co	ountry:			
5. SEX	Male Female		Philippines  11036 Bustrillos Compound,  Old Faculty Village  Brgy Batong Malake						
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS			Apartment 2  Downhill Drive				
7. HEIGHT (m)	1.53 m				Los Banos, Laguna				
8. WEIGHT (kg)	47 kg	ZIP CODE	4031						
9. BLOOD TYPE	В	18. PERMANENT ADDRESS	Limbauan St. Ext.		В	rgy. Campesao			
10. GSIS ID NO.			Borongan Eastern Sa	mar					
11. PAG-IBIG ID NO.		e su prima de la companya de la comp							
12. PHILHEALTH NO.	2. PHILHEALTH NO. 13-025160815-7		6800						
13. SSS NO.	13. SSS NO.			N/A					
14. TIN NO.	457-368-261	20. MOBILE NO.		09758791734					
15. AGENCY EMPLOYEE NO.	V00878	21. E-MAIL ADDRESS (if any)	al	demanny	/len@yahoo.d	com			
II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME	N/A		ME of CHILDREN (Write		l list all)	DATE OF BIRT	TH (mm/dd/yyyy)		
FIRST NAME		NAME EXTENSION (JR., SR)		N/A					
MIDDLE NAME									
OCCUPATION									
EMPLOYER/BUSINESS NAME									
BUSINESS ADDRESS									
TELEPHONE NO.									
24. FATHER'S SURNAME	Alde			***************************************					
FIRST NAME	Emmanuel	Sr.							
MIDDLE NAME	Balano								
25. MOTHER'S MAIDEN NAME									
SURNAME	Coles								
FIRST NAME	Teresita								
MIDDLE NAME	Arma		(C	ontinue on se	parate sheet if neces	sary)			
III. EDUCATIONAL BACK	GROUND								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COUL (Write in full)			HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS		
			From	To			Academic		
ELEMENTARY	Eugenio S. Daza Pilot Elementary School	Elementary	1997	2003	100	2003	Honor		
SECONDARY	Eastern Samar National Comprehensive High School	High School	2003	2007		2007	Academic Honor		
VOCATIONAL / TRADE COURSE	N/A	*							
COLLEGE	University of the Philippines Visayas Tacloban College	BS Biology	2007	2011		2011			
GRADUATE STUDIES	Visayas State Univeristy	MS Plant Pathology	2011	2015		2015	DOST		
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7. CAR	EER SERVICE/ RA 108 SPECIAL LAWS	80 (BOARD/ BAR) UNDER S/ CES/ CSEE	RATING	DATE OF EXAMINATION /	PLACE OF EXAMINAT	ION / CONFE	RMENT	LICENSE (if ap	
B/		Y / DRIVER'S LICENSE	(If Applicable)	CONFERMENT	PEACE OF EXAMINATI	ION / CONFE	VIVICIAL	NUMBER	Date of Validit
	Civil Service El	ce Eligibility 81.1 10/17/2010 Leyte Normal University		erit kara karan sa peraran	in the same productive and the same				
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WORK	EXPERIENCE		(Cc	ontinue on separate sheet if	necessary)				
	ivate employment	t. Start from your recent	t work) Descripti	on of duties should be	indicated in the attache	d Work Ex	perience sheet		
	/mm/dd/yyyy)	POSITION TI (Write in full/Do not a			ICY / OFFICE / COMPANY to not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format *00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV SERVI
1/2014	5/30/2015	Science Research	Assistant	Department of Pest Abaca Res	Management/ National search Center	15000.00		Job Order	Yes
8/2015	present	Instructo	or .		Pest Management	19940.00	12	Regular- Temporary	Yes
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SIGN	NATURE		Max lod		DATE		Novmber 24, 201	7 DIRA	17), Page 2

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9. * NAME & ADDRESS OF O		INCLUSIVE DATES		NUMBER OF HOURS	DOCUTION (NATURE OF WORK	
(Write in ful	)	(mm/dd/yyyy) From To				POSITION / NATURE OF WORK
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		-	-	-		
LEARNING AND DEVELOPMENT (L&D)		ntinue on separat		ry)		
rt from the most recent L&D/training program and inclu				Chief/Executive/Mana	agerial positions)	
			VE DATES OF		Type of LD	
TITLE OF LEARNING AND DEVELOPMENT INT (Write in fu		ATTENDANCE (mm/dd/yyyy) From To		NUMBER OF HOURS	( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
(William III II						
onal Workshop on Invasive Pests and Diseases of Cassave		3/14/2016	3/17/2016	32.0	Participant	Philippine Rootcrops Center
		-	-			
National Organic Agriculture Scientific Conference	Towarde Building Drosseting Drosseting	2/16/2016	2/20/2016	40.0	Participant	Organic Agriculture Society
ning-Workshop on Writing and Presenting Proposal rards Building Science and Culture in Eastern Visaya		10/1/2015	10/2/2015	16.0	Participant	Outstanding Young Scientists Inc.
Regional Conference of the Society of Agricultural Ed		Septermber 25	5, 2015	8.0	Participant	Department of Agriculture
icultural Crops Production	7.70	9/17/2015	9/20/2015	32.0	Participant	Technical Education and Skills Develoment Authority
nference on Experiences and Lessons Learned in Re	habilitation Typhoon-Damaged	+	+	_		-
riculture		7/30/2015	8/1/2015	16.0	Poster Presenter	Visayas State University
ional DOST-SEI ASTHRDP-NSC Scholars Conferen	ce	5/7/2015	5/8/2015	16.0	Poster Presenter	Department of Science and Technology
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II. OTHER INFORMATION						
31. SPECIAL SKILLS and HOBBIES	32. NO	N-ACADEMIC DIS		COGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZAT
OF EATHER WAT INDUITED	32. (Write in full)					(write in full)
Driving and Reading	T- T	Organic Agriculture Society of the Philippines (OAS				
	1	Philippine Phytopathological Society				
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34.	Are you related by consanguinity or affinity to the chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree?	YES NO					
	b. within the fourth degree (for Local Government Unit - Car	☐ YES ✓ NO If YES, give details:					
35.	a. Have you ever been found guilty of any administrative of	YES V NO If YES, give details:					
	b. Have you been criminally charged before any court?	☐ YES					
36.	Have you ever been convicted of any crime or violation of a by any court or tribunal?	☐ YES ✓ NO If YES, give details:					
	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, export (abolition) in the public or private sector?	YES If YES, give details: Finis	NO shed contract as Research Assistant				
38.	a. Have you ever been a candidate in a national or local ele Barangay election)?	ection held within the last year (except	YES If YES, give details	✓ NO			
	b. Have you resigned from the government service during telection to promote/actively campaign for a national or local	YES NO If YES, give details:					
39.	Have you acquired the status of an immigrant or permanen	YES NO If YES, give details (country):					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)						
a.	Are you a member of any indigenous group?	YES	✓ NO				
b.	Are you a person with disability?		If YES, please specify:				
C.	Are you a solo parent?	If YES, please specify ID No:  YES VO If YES, please specify ID No:					
41.	REFERENCES (Person not related by consanguinity or affinity to applica	nt /appointee)					
	NAME	ADDRESS	TEL. NO.				
	JESUSITO L. LIM	Department of Pest Management					
	RUBEN M. GAPASIN	Department of Pest Management					
	MA. JULIET C. CENIZA	National Coconut Research Center					
42.	I declare under oath that I have personally accomplishe complete statement pursuant to the provisions of pertin Philippines. I authorize the agency head/authorized rep I agree that any misrepresentation made in this do administrative/criminal case/s against me.	nent laws, rules and regulations of the resentative to verify/validate the content	Republic of the ts stated herein.	MANNYLEN C. ALDE PHOTO			
G P	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  LEASE INDICATE ID Number and Date of Issuance						
G	overnment Issued ID: PhilHealth	hal					
Ш	13-025160815-7 January 2013	Signature (Sign inside the t	nov)				
		Novmber 24, 2017  Date Accomplished		Right Thumbmark			
F	SUBSCRIBED AND SWORN to before me this	DEC 0 5 2017 affiant exhit	nit@a his/har validly issued	government ID as indicated above.			
	PAGENO. D90 BOOK NO. LXV SERIES OF 2013	Person Administering Oa	Y.) ROMMEL ON NOTARY PUBLISHED PROVINCE	S. OLIVA BLIC CE OF LAGUNA 11/3/17/10cal, City Lag.			
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Roll No. 37137
MCLE No. V0001987
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