

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	ALAO		
FIRST NAME	VIRGELIO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	MONTER		
3. DATE OF BIRTH (mm/dd/yyyy)	2/12/1986	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	BALUGO, ALBUERA, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	<div>House/Block/Lot No. Street</div> <div>BALUGO</div> <div>Subdivision/Village Barangay</div> <div>ALBUERA LEYTE</div> <div>City/Municipality Province</div>
7. HEIGHT (m)	1.64	ZIP CODE	6542
8. WEIGHT (kg)	75		
9. BLOOD TYPE	B	18. PERMANENT ADDRESS	<div>House/Block/Lot No. Street</div> <div>BALUGO</div> <div>Subdivision/Village Barangay</div> <div>ALBUERA LEYTE</div> <div>City/Municipality Province</div>
10. GSIS ID NO.	02004045300	ZIP CODE	6542
11. PAG-IBIG ID NO.	NONE		
12. PHILHEALTH NO.	130500781719		
13. SSS NO.	0627018420	19. TELEPHONE NO.	NONE
14. TIN NO.	946087052	20. MOBILE NO.	+639102000484
15. AGENCY EMPLOYEE NO.	-----	21. E-MAIL ADDRESS (if any)	virgilmonter@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	NAME EXTENSION (JR., SR)		N/A	
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	ALAO			
FIRST NAME	VICENTE, SR. (DECEASED)	NAME EXTENSION (JR., SR)		
MIDDLE NAME	ACOMPAÑADO			
25. MOTHER'S MAIDEN NAME				
SURNAME	MONTER			
FIRST NAME	JOSEFINA			
MIDDLE NAME	BITONIO		(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	BALUGO ELEMENTARY SCHOOL	PRIMARY SCHOOL	1992	1998		1998	
SECONDARY	BALUGO NATIONAL HIGH SCHOOL	HIGH SCHOOL	1998	2002		2002	SALUTATORIAN
VOCATIONAL / TRADE COURSE	NONE						
COLLEGE	VISAYAS STATE UNIVERSITY (FORMERLY LEYTE STATE UNIVERSITY)	BACHELOR OF SCIENCE IN STATISTICS	2003	2007		2007	COLLEGE SCHOLARSHIP
GRADUATE STUDIES	UNIVERSITY OF THE PHILIPPINES, DILIMAN CEBU NORMAL UNIVERSITY	MASTER OF SCIENCE IN STATISTICS MASTER OF SCIENCE IN MATHEMATICS	2013 2010	2015 2012	38 UNITS 30 UNITS W/ COMPRE EXAM	2015 CANDIDATE	CHED-HEDP-FDP NONE


(Continue on separate sheet if necessary)

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[illegible]

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

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

(Continue on separate sheet if necessary)			
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SIGNATURE

DATE _____

08/02/2018

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATIONS

[illegible]

(Continue on separate sheet if necessary)


VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

(Continue on separate sheet if necessary)

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
ANALYZE STATISTICAL DATA		MTAP-TL
SINGING		UNIVERSITY OF THE PHILIPPINES (UP) ALUMNI ASSOCIATION (UPAA)
DANCING		VISAYAS STATE UNIVERSITY FACULTY ASSOCIATION (VSUFA)
SPORTS		VISAYAS STATE UNIVERSITY ALUMNI ASSOCIATION
PLANTING		MSP

(Continue on separate sheet if necessary)

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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)?

☐ YES

☒ NO

☐ YES

☒ 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?

☐ YES

☒ NO

If YES, give details:

☐ 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 law, decree, ordinance or regulation by any court or tribunal?

☐ YES

☒ 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?

☒ YES

☐ NO

If YES, give details:

RESIGNATION AT TAYTAY SA KAUSWAGAN, INC.

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?

☐ YES

☒ NO

If YES, give details:

☐ YES

☒ NO

If YES, give details:

39. Have you acquired the status of an immigrant or permanent resident 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 (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?

☐ YES

☒ NO

If YES, please specify:

☐ YES

☒ NO

If YES, please specify ID No:

☐ YES


☒ NO

If YES, please specify ID No:


41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
DR. NORBERTO E. MILLA	VISCA, BAYBAY CITY, LEYTE	09358590890
DR. JACQUELINE M. GUARTE	VISCA, BAYBAY CITY, LEYTE	09164057852
PROF. MA. NENA Q. RAMOS	BRGY. GUADALUPE, BAYBAY CITY, LEYTE	09261731077

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.



VIRGELIO M. ALAO




Right Thumbmark

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.: 946087052

Date/Place of Issuance: 07/31/2007, ORMOC CITY

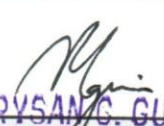


Signature (Sign inside the box)

08/02/2018

Date Accomplished

SUBSCRIBED AND SWORN to before me this OCT 02 2018, affiant exhibiting his/her validly issued government ID as indicated above.



ATTY. RYSANG C. GUINOCOR

VSU LEGAL OFFICER

Person Administering Oath

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