

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	Gonzaga			
FIRST NAME	Edilberto	NAME EXTENSION (JR., SR) Jr.		
MIDDLE NAME	Labian			
3. DATE OF BIRTH (mm/dd/yyyy)	02/09/1980	16. CITIZENSHIP	☒ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization Pls. indicate country:	
4. PLACE OF BIRTH	Baybay, Leyte	If holder of dual citizenship, please indicate the details.	Philippines	
5. SEX	☒ Male ☐ Female			
6. CIVIL STATUS	☐ Single ☒ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	Apt.7 Kilbourne St. House/Block/Lot No. Street VSU Subdivision/Village Barangay City/Municipality Province	
7. HEIGHT (m)	1.64	ZIP CODE		
8. WEIGHT (kg)	56.00			
9. BLOOD TYPE	A+		18. PERMANENT ADDRESS	Apt.7 House/Block/Lot No. Street VSU Campus Pangasungan Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
10. GSIS ID NO.	N/A		ZIP CODE	
11. PAG-IBIG ID NO.	N/A			6521
12. PHILHEALTH NO.	N/A			
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A	
14. TIN NO.	N/A	20. MOBILE NO.	968-550-0352	
15. AGENCY EMPLOYEE NO.	V00246	21. E-MAIL ADDRESS (if any)	edilberto.gonzaga@vsu.edu.ph	

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Gonzaga		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Debie Louella	NAME EXTENSION (JR., SR) Sr.	Jemima Abigail Uy Gonzaga	11/14/2006
MIDDLE NAME	Uy		Ed Gabriel Uy Gonzaga	05/19/2013
OCCUPATION	Self-employed			
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.	09466752929			
24. FATHER'S SURNAME	Gonzaga			
FIRST NAME	Edilberto	NAME EXTENSION (JR., SR) Sr.		
MIDDLE NAME	Tapar			
25. MOTHER'S MAIDEN NAME	Labian			
SURNAME	Gonzaga			
FIRST NAME	Adelina			
MIDDLE NAME	Labian		(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	Guadalupe Elementary School	Elementary	1987	1993		1993	N/A
SECONDARY	Visayas State University Laboratory High School	High School	1993	1997		1997	N/A
VOCATIONAL/ TRADE COURSE	N/A						
COLLEGE	Visayas State University	Bachelor of Science in Statistics	1997	2002		2002	N/A
GRADUATE STUDIES	Leyte Normal University	Master of Education in Mathematics	2011	2014		2014	N/A
PLEASE SEE ATTACHMENT A							
(Continue on separate sheet if necessary)							
SIGNATURE			DATE		09/27/2023		

Attachment A

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			
	GRADUATE STUDIES	University of the Philippines - Los Banos	Doctor of Philosophy in Statistics	2018	2023	On Dissertation	2023	
(Continue on separate sheet if necessary)								
SIGNATURE				DATE		09/27/2023		

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
	CAREER SERVICE PROFESSIONAL EXAMINATION	80.81	01/06/2005	LNHS, Tacloban City	N/A	N/A
	Career Service Sub-Professional	87.04	07/26/2001	OCNHS, Ormoc City	N/A	N/A

(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.

28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format"00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
From	To						
01/01/2023	PRESENT	Assistant Professor I	Visayas State University	36,619.00	15-1	Permanent	Y
10/03/2022		Assistant Professor I	Visayas State University	35,097.00	15-1	Permanent	Y
01/01/2022		Instructor II	Visayas State University	29,798.00	13-1	Permanent	Y
01/01/2021		Instructor II	Visayas State University	28,276.00	13-1	Permanent	Y
01/01/2021		Instructor II	Visayas State University	28,276.00	13-1	Permanent	Y
01/01/2020		Instructor II	Visayas State University	26,754.00	13-1	Permanent	Y
07/01/2019	12/31/2019	Instructor II	Visayas State University	25,232.00	13-1	Permanent	Y
01/01/2019	06/30/2019	Instructor I	Visayas State University	23,222.00	12-2	Permanent	Y
01/01/2018	12/31/2018	Instructor I	Visayas State University	22,410.00	12-2	Permanent	Y
01/01/2017	12/31/2017	Instructor I	Visayas State University	21,626.00	12-2	Permanent	Y
10/01/2016	12/31/2016	Instructor I	Visayas State University	20,870.00	12-2	Permanent	Y
01/01/2016	09/30/2016	Instructor I	Visayas State University	20,870.00	12-2	Temporary	Y
12/01/2015	12/31/2015	Instructor I	Visayas State University	241,680.00	-		Y
11/01/2013	10/31/2015	Instructor I	Visayas State University	19,940.00	-	Temporary	Y
12/01/2012	10/31/2013	Instructor I	Visayas State University	19,940.00	-	Temporary	Y
06/01/2012		Instructor I	Visayas State University	19,940.00	-	Contractual	Y
06/01/2012	05/31/2013	Instructor I	Visayas State University	19,940.00	-	Contractual	Y
06/01/2011		Instructor I	Visayas State University	18,333.00	-	Contractual	Y
06/01/2011	05/31/2012	Instructor I	Visayas State University	16,726.00	-	Contractual	Y
06/24/2010		Instructor I	Visayas State University	16,726.00	-	Contractual	Y
06/16/2010	05/31/2011	Instructor I	Visayas State University	15,119.00	-	Contractual	Y
01/05/2004	06/15/2010	Field Collection Officer	Leyte BIDANI Means Foundation, Inc.	6,500.00	-	Contractual	N

(Continue on separate sheet if necessary)

SIGNATURE		DATE	09/27/2023
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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: Finished contract _____														
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) <table><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr><tr><td>May Ann E. Palen</td><td>VSU, Visca, Baybay City, Leyte</td><td>(053) 565 0600</td></tr><tr><td>Shalom Grace C. Sugano</td><td>VSU, Visca, Baybay City, Leyte</td><td>(053) 563 7027</td></tr><tr><td></td><td></td><td></td></tr></table>						NAME	ADDRESS	TEL. NO.	May Ann E. Palen	VSU, Visca, Baybay City, Leyte	(053) 565 0600	Shalom Grace C. Sugano	VSU, Visca, Baybay City, Leyte	(053) 563 7027			
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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.			ID picture taken within the last 6 months 3.5 cm x 4.5 cm (passport size) With full and handwritten name tag and signature over printed name Computer generated or photocopied picture is not acceptable PHOTO														
<table><tr><td>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i></td></tr><tr><td>Government Issued ID: N/A</td></tr><tr><td>ID/License/Passport No.: N/A</td></tr><tr><td>Date/Place of Issuance: N/A</td></tr></table>			Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i>	Government Issued ID: N/A	ID/License/Passport No.: N/A	Date/Place of Issuance: N/A	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>09/27/2023</td></tr><tr><td>Date Accomplished</td></tr></table>				Signature (Sign inside the box)	09/27/2023	Date Accomplished				
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09/27/2023																	
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SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above. Person Administering Oath																	