

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                       | Piamonte  |  |  |
| FIRST NAME                       | Robelyn   | NAME EXTENSION (JR., SR)<br>N/A                                |  |
| MIDDLE NAME                      | Tortillas   |  |  |
| 3. DATE OF BIRTH<br>(mm/dd/yyyy) | 03/15/1981  | 16. CITIZENSHIP  | <input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship<br><input type="checkbox"/> by birth <input type="checkbox"/> by naturalization<br>Pls. indicate country: |
| 4. PLACE OF BIRTH                | Baybay, Leyte   | If holder of dual citizenship,<br>please indicate the details. | Philippines  |
| 5. SEX AT BIRTH                  | <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female  |  |  |
| 6. CIVIL STATUS                  | <input type="checkbox"/> Single <input checked="" type="checkbox"/> Married<br><input type="checkbox"/> Widowed <input type="checkbox"/> Separated<br><input type="checkbox"/> Other/s: | 17. RESIDENTIAL ADDRESS  | Zone 5<br>House/Block/Lot No. Street<br>Cogon<br>Subdivision/Village Barangay<br>BAYBAY LEYTE<br>City/Municipality Province  |
| 7. HEIGHT (m)                    | 1.49  | ZIP CODE   | 6521   |
| 8. WEIGHT (kg)                   | 65.00   |  |  |
| 9. BLOOD TYPE                    | O+  | 18. PERMANENT ADDRESS  | House/Block/Lot No. Street<br>Cogon<br>Subdivision/Village Barangay<br>BAYBAY LEYTE<br>City/Municipality Province  |
| 10. UMID ID NO.                  |   | ZIP CODE   | 6521   |
| 11. PAG-IBIG ID NO.              | N/A   |  |  |
| 12. PHILHEALTH NO.               | N/A   |  |  |
| 13. PhilSys NO. (PSN)            |   | 19. TELEPHONE NO.  | (053) 300-2340   |
| 14. TIN NO.                      | N/A   | 20. MOBILE NO.   | 917-154-699  |
| 15. AGENCY EMPLOYEE NO.          | V00404  | 21. E-MAIL ADDRESS (if any)                                    | rtpiamonte@vsu.edu.ph  |

II. FAMILY BACKGROUND

|                          |                       |                          |   |                            |
|--------------------------|-----------------------|--------------------------|---|----------------------------|
| 22. SPOUSE'S SURNAME     | Piamonte              |                          | 23. NAME OF CHILDREN (Write full name and list all) | DATE OF BIRTH (mm/dd/yyyy) |
| FIRST NAME               | Sanross               | NAME EXTENSION (JR., SR) | John Matthew T Piamonte                             | 08/09/2008                 |
| MIDDLE NAME              | Uy                    |                          |   |                            |
| OCCUPATION               | OFW                   |                          |   |                            |
| EMPLOYER/BUSINESS NAME   | N/A                   |                          |   |                            |
| BUSINESS ADDRESS         | N/A                   |                          |   |                            |
| TELEPHONE NO.            | N/A                   |                          |   |                            |
| 24. FATHER'S SURNAME     | Tortillas             |                          |   |                            |
| FIRST NAME               | Pedro                 | NAME EXTENSION (JR., SR) |   |                            |
| MIDDLE NAME              | Capuyan               |                          |   |                            |
| 25. MOTHER'S MAIDEN NAME | Loreta Esguerra Necio |                          |   |                            |
| SURNAME                  | Tortillas             |                          |   |                            |
| FIRST NAME               | Loreta                |                          |   |                            |
| MIDDLE NAME              | Necio                 |                          | (Continue on separate sheet if necessary)           |                            |

III. EDUCATIONAL BACKGROUND

| 26. LEVEL                                 | NAME OF SCHOOL<br>(Write in full) | BASIC EDUCATION/DEGREE/COURSE<br>(Write in full)               | PERIOD OF ATTENDANCE |      | HIGHEST LEVEL/UNITS EARNED<br>(if not graduated) | YEAR GRADUATED | SCHOLARSHIP/ ACADEMIC HONORS RECEIVED |
|---|-----------------------------------|--|----------------------|------|--|----------------|---------------------------------------|
|   |                                   |  | From                 | To   |  |                |                                       |
| ELEMENTARY                                | Baybay North Central School       | Elementary   | 1988                 | 1994 |  | 1994           | N/A                                   |
| SECONDARY                                 | Visca Laboratory High School      | High School  | 1994                 | 1998 |  | 1998           | N/A                                   |
| VOCATIONAL/ TRADE COURSE                  | N/A                               |  |                      |      |  |                |                                       |
| COLLEGE                                   | Visayas State University          | Bachelor of Science in Agriculture (Major in Plant Protection) | 1998                 | 2002 |  | 2002           | N/A                                   |
| GRADUATE STUDIES                          | Visayas State University          | Master of Science in Plant Pathology                           | 2005                 | 2011 |  | 2011           | N/A                                   |
| PLEASE SEE ATTACHMENT A                   |                                   |  |                      |      |  |                |                                       |
| (Continue on separate sheet if necessary) |                                   |  |                      |      |  |                |                                       |
| SIGNATURE                                 |                                   |  | DATE                 |      | 10/03/2025                                       |                |                                       |

Attachment A

| III. EDUCATIONAL BACKGROUND               |                  |  |  |                      |      |  |                   |  |
|---|------------------|--|--|----------------------|------|--|-------------------|--|
| 26.                                       | LEVEL            | NAME OF SCHOOL<br>(Write in full)          | BASIC EDUCATION/DEGREE/COURSE<br>(Write in full) | PERIOD OF ATTENDANCE |      | HIGHEST<br>LEVEL/UNITS<br>EARNED<br>(if not graduated) | YEAR<br>GRADUATED | SCHOLARSHIP/<br>ACADEMIC<br>HONORS<br>RECEIVED |
|   |                  |  |  | From                 | To   |  |                   |  |
|   | GRADUATE STUDIES | University of the Philippines at Los Baños | Doctor of Philosophy in Plant Pathology          | 2013                 | 2018 |  | 2018              |  |
|   |                  |  |  |                      |      |  |                   |  |
|   |                  |  |  |                      |      |  |                   |  |
|   |                  |  |  |                      |      |  |                   |  |
|   |                  |  |  |                      |      |  |                   |  |
|   |                  |  |  |                      |      |  |                   |  |
|   |                  |  |  |                      |      |  |                   |  |
|   |                  |  |  |                      |      |  |                   |  |
| (Continue on separate sheet if necessary) |                  |  |  |                      |      |  |                   |  |
| SIGNATURE                                 |                  |  |  | DATE                 |      | 10/03/2025   |                   |  |

IV. CIVIL SERVICE ELIGIBILITY

| 27. CES/CSEE/CAREER SERVICE/RA 1080 (BOARD/ BAR)/UNDER SPECIAL LAWS/CATEGORY II/ IV ELIGIBILITY and ELIGIBILITIES FOR UNIFORMED PERSONNEL | RATING<br>(If Applicable) | DATE OF EXAMINATION / CONFERMENT | PLACE OF EXAMINATION / CONFERMENT | LICENSE (if applicable) |             |
|---|---------------------------|----------------------------------|-----------------------------------|-------------------------|-------------|
|   |                           |                                  |                                   | NUMBER                  | Valid Until |
| Agriculturist   |                           | N/A                              | Tacloban City                     | 0013984                 | 03/15/2028  |
| Career Service Professional Eligibility   |                           | N/A                              | N/A                               | PD 907                  | N/A         |
| Accredited Organic Agriculture Researcher for Organic Bio-Control Agents (OBCA)   |                           | 06/06/2025                       | Cebu City                         | BAFS-OADRS-AR-152       | 06/05/2027  |
|   |                           |                                  |                                   |                         |             |
|   |                           |                                  |                                   |                         |             |
|   |                           |                                  |                                   |                         |             |
|   |                           |                                  |                                   |                         |             |

(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<br>(mm/dd/yyyy) |            | POSITION TITLE<br>(Write in full/Do not abbreviate) | DEPARTMENT / AGENCY / OFFICE / COMPANY<br>(Write in full/Do not abbreviate) | STATUS OF APPOINTMENT | GOV'T SERVICE<br>(Y/ N) |
|-------------------------------------|------------|---|---|-----------------------|-------------------------|
| From                                | To         |   |   |                       |                         |
| 01/01/2025                          | PRESENT    | Associate Professor V                               | Visayas State University  | Permanent             | Y                       |
| 04/22/2024                          |            | Associate Professor V                               | Visayas State University  | Permanent             | Y                       |
| 01/01/2024                          | 04/21/2024 | Associate Professor IV                              | Visayas State University  | Permanent             | Y                       |
| 01/01/2023                          |            | Associate Professor IV                              | Visayas State University  | Permanent             | Y                       |
| 09/15/2022                          |            | Associate Professor IV                              | Visayas State University  | Permanent             | Y                       |
| 07/01/2022                          |            | Assistant Professor IV                              | Visayas State University  | Permanent             | Y                       |
| 01/01/2022                          |            | Assistant Professor IV                              | Visayas State University  | Permanent             | Y                       |
| 01/01/2022                          |            | Assistant Professor IV                              | Visayas State University  | Permanent             | Y                       |
| 01/01/2020                          |            | Assistant Professor IV                              | Visayas State University  | Permanent             | Y                       |
| 01/01/2020                          |            | Assistant Professor IV                              | Visayas State University  | Permanent             | Y                       |
| 07/01/2019                          | 12/31/2019 | Assistant Professor IV                              | Visayas State University  | Permanent             | Y                       |
| 01/01/2019                          |            | Assistant Professor IV                              | Visayas State University  | Permanent             | Y                       |
| 01/01/2018                          | 12/31/2018 | Assistant Professor II                              | Visayas State University  | Permanent             | Y                       |
| 01/01/2017                          | 12/31/2017 | Instructor II                                       | Visayas State University  | Permanent             | Y                       |
| 01/01/2017                          |            | Assistant Professor II                              | Visayas State University  | Permanent             | Y                       |
| 08/01/2016                          | 12/31/2016 | Instructor II                                       | Visayas State University  | Temporary             | Y                       |
| 01/01/2016                          | 07/31/2016 | Instructor II                                       | Visayas State University  | Temporary             | Y                       |
| 11/01/2015                          | 12/31/2015 | Instructor II                                       | Visayas State University  | Temporary             | Y                       |
| 01/01/2015                          | 10/30/2015 | Instructor II                                       | Visayas State University  | Temporary             | Y                       |
| 06/01/2012                          | 12/31/2014 | Instructor I  | Visayas State University  | Contractual           | Y                       |
| 06/01/2011                          | 05/31/2012 | Instructor I  | Visayas State University  | Contractual           | Y                       |
| 06/24/2010                          | 05/31/2011 | Instructor I  | Visayas State University  | Contractual           | Y                       |
| 09/01/2009                          | 06/23/2010 | Instructor I  | Visayas State University  | Permanent             | Y                       |
|                                     |            |   |   |                       |                         |
|                                     |            |   |   |                       |                         |
|                                     |            |   |   |                       |                         |
|                                     |            |   |   |                       |                         |

(Continue on separate sheet if necessary)

|           |  |      |            |
|-----------|--|------|------------|
| SIGNATURE |  | DATE | 10/03/2025 |
|-----------|--|------|------------|

## VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

| 29. | NAME & ADDRESS OF ORGANIZATION<br>(Write in full) | INCLUSIVE DATES<br>(mm/dd/yyyy) |     | NUMBER OF<br>HOURS | POSITION / NATURE OF WORK |
|-----|---|---------------------------------|-----|--------------------|---------------------------|
|     |   | From                            | To  |                    |                           |
|     | N/A   | N/A                             | N/A | N/A                | N/A                       |
|     |   |                                 |     |                    |                           |
|     |   |                                 |     |                    |                           |
|     |   |                                 |     |                    |                           |
|     |   |                                 |     |                    |                           |
|     |   |                                 |     |                    |                           |

(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)*

[illegible]

(Continue on separate sheet if necessary)

## VIII. OTHER INFORMATION

| 31. SPECIAL SKILLS and HOBBIES | 32. NON-ACADEMIC DISTINCTIONS / RECOGNITION<br>(Write in full)        | 33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION<br>(Write in full)  |
|--------------------------------|---|--|
| N/A                            | Gerardo O. Ocfemia Outstanding Plant Pathologist in Instruction Award | Society for the Advancement of Philippine Soil Science, Inc. (SAPSS)                                 |
|                                |   | PhilFruits Association   |
|                                |   | Government Financial Management Innovators Circle (GFMIC), Inc.                                      |
|                                |   | Philippine Schools, Universities and Colleges Computer Education and Systems Society (PSUCCESS), Inc |
|                                |   | Weed Science Society of the Philippines  |
|                                |   | Philippine Phytopathological Society, Inc.   |
|                                |   |  |

(Continue on separate sheet if necessary)

|                  |  |             |            |
|------------------|--|-------------|------------|
| <b>SIGNATURE</b> |  | <b>DATE</b> | 10/03/2025 |
|------------------|--|-------------|------------|

|  |  |  |
|--|--|--|
| 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,<br>a. within the third degree?<br>b. within the fourth degree (for Local Government Unit - Career Employees)?   |  | <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details:<br/>_____</div>   |
| 35. a. Have you ever been found guilty of any administrative offense?<br><br>b. Have you been criminally charged before any court?   |  | <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details:<br/>_____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details:<br/>Date Filed: _____<br/>Status of Case/s: _____</div>  |
| 36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?   |  | <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details:<br/>_____</div>   |
| 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?  |  | <div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details:<br/>Resignation<br/>_____</div>   |
| 38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?<br><br>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?   |  | <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>  |
| 39. Have you acquired the status of an immigrant or permanent resident of another country?   |  | <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country):<br/>_____</div>   |
| 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:<br>a. Are you a member of any indigenous group?<br>b. Are you a person with disability?<br>c. Are you a solo parent?  |  | <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No _____</div> |
| 41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)   |  |  |
| NAME   |  | OFFICE / RESIDENTIAL ADDRESS   |
| Ivy C. Emnace  |  | OVPREI, VSU  |
| Rotacio S. Gravoso   |  | OVPA, VSU  |
| Suzette B. Lina  |  | FAFS, Visayas State University   |
| CONTACT NO. AND/OR EMAIL   |  | 565-0600 (1005)  |
|  |  | 565-0600 (1001)  |
|  |  | 565-0600 (1083)  |
| 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. |  |  |
| Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance   |  |  |
| Government Issued ID: PRC  |  |  |
| ID/License/Passport No.: 0013984   |  |  |
| Date/Place of Issuance: 11/30/-0001 / PRC Tacloban   |  |  |
|  |  | Signature (Sign inside the box)  |
|  |  | 10/03/2025   |
|  |  | Date Accomplished  |
|  |  | Right Thumbmark  |
| SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.  |  |  |
| Person Administering Oath  |  |  |