

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	Ebit		
FIRST NAME	Philip Caesar	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	Luna		
3. DATE OF BIRTH (mm/dd/yyyy)	12/20/1989	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	Lipata, Paranas, Samar	If holder of dual citizenship, please indicate the details.	Philippines
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
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:	17. RESIDENTIAL ADDRESS	Apartment 50 Kilbourne Drive House/Block/Lot No. Street Visayas State University Pangasungan Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.70	ZIP CODE	6521
8. WEIGHT (kg)	75.00		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	N/A		
13. SSS NO.	N/A	19. TELEPHONE NO.	(053) 563-9585
14. TIN NO.	N/A	20. MOBILE NO.	970-056-4340
15. AGENCY EMPLOYEE NO.	V00752	21. E-MAIL ADDRESS (if any)	philipcaesar.ebit@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Ebit		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	J-Annie	NAME EXTENSION (JR., SR)	Khaeser Jade D. Ebit	12/18/2007
MIDDLE NAME	Gonzales		Ma. Sophia D. Ebit	10/14/2010
OCCUPATION	Assistant Professor		Von Philip C-Zar G. Ebit	07/08/2011
EMPLOYER/BUSINESS NAME	Visayas State University		Aia C-Zareinna G. Ebit	01/11/2019
BUSINESS ADDRESS	Pangasugan, Baybay City, Leyte			
TELEPHONE NO.				
24. FATHER'S SURNAME	Ebit			
FIRST NAME	David	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Abawag			
25. MOTHER'S MAIDEN NAME	Luna			
SURNAME	Ebit			
FIRST NAME	Adelina			
MIDDLE NAME	Sillacay		(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	Matlang Elementary School	Elementary	1996	2002		2002	N/A
SECONDARY	Matlang National High School	High School	2002	2006		2006	N/A
VOCATIONAL/ TRADE COURSE	N/A						
COLLEGE	Eastern Visayas State University	Bachelor of Science in Electrical Engineering	2006	2011		2011	N/A
GRADUATE STUDIES	University of San Carlos	Master of Science (Major in Electrical Engineering)	2016	2024		2024	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	07/12/2024
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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
	REGISTERED ELECTRICAL ENGINEER		09/10/2011	MLQU, Quezon City, Manila	0047791	12/20/2026

(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						
01/01/2024	PRESENT	Instructor I	Visayas State University	29,737.00	12-3	Temporary	Y
01/01/2023		Instructor I	Visayas State University	29,737.00	12-3	Temporary	Y
01/01/2023	12/31/2023	Instructor I	Visayas State University	29,737.00	12-3	Temporary	Y
01/01/2023	12/31/2023	Instructor I	Visayas State University	29,737.00	12-3	Temporary	Y
01/01/2022		Instructor I	Visayas State University	28,180.00	12-3	Temporary	Y
05/16/2021		Instructor I	Visayas State University	26,624.00	12-3	Temporary	Y
01/01/2021	05/15/2021	Instructor I	Visayas State University	26,336.00	12-2	Temporary	Y
01/01/2020		Instructor I	Visayas State University	24,495.00	12-1	Temporary	Y
01/01/2020	12/31/2020	Instructor I	Visayas State University	23,222.00	12-2	Temporary	Y
01/01/2019		Instructor I	Visayas State University	23,222.00	12-2	Temporary	Y
01/01/2019	12/31/2019	Instructor I	Visayas State University	22,410.00	12-2	Temporary	Y
01/01/2018	12/31/2018	Instructor I	Visayas State University	22,410.00	12-2	Temporary	Y
01/01/2017	12/31/2017	Instructor I	Visayas State University	21,626.00	12-2	Temporary	Y
06/01/2016	12/31/2016	Instructor I	Visayas State University	20,870.00	12-2	Temporary	Y
01/01/2016	05/31/2016	Instructor I	Visayas State University	20,870.00	12-2	Temporary	Y
10/01/2015	12/31/2015	Instructor I	Visayas State University	20,140.00	-	Temporary	Y
06/01/2015	09/30/2015	Instructor I	Visayas State University	19,940.00	-	Temporary	Y
06/01/2012	05/31/2015	Instructor I	Visayas State University	19,940.00	-	Temporary	Y

(Continue on separate sheet if necessary)

SIGNATURE		DATE	07/12/2024
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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	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)

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			
	BERDE Professional Basic Training Course	06/05/2024	06/06/2024	16	Technical	Philippine Green Building Council

(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)
	N/A		N/A		Institute of Integrated Electrical Engineers, Phil

(Continue on separate sheet if necessary)

SIGNATURE		DATE	07/12/2024
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<div>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,</div> <div>a. within the third degree?</div> <div>b. within the fourth degree (for Local Government Unit - Career Employees)?</div>		<div><div><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div><div><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div></div> <div>If YES, give details:</div> <div></div>												
<div>35. a. Have you ever been found guilty of any administrative offense?</div> <div>b. Have you been criminally charged before any court?</div>		<div><div><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div><div>If YES, give details:</div><div></div></div> <div><div><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div><div>If YES, give details:</div><div>Date Filed: <div></div></div><div>Status of Case/s: <div></div></div></div>												
<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>		<div><div><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div><div>If YES, give details:</div><div></div></div>												
<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>		<div><div><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div><div>If YES, give details:</div><div></div></div>												
<div>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</div> <div>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>		<div><div><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div><div>If YES, give details:</div><div></div></div> <div><div><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div><div>If YES, give details:</div><div></div></div>												
<div>39. Have you acquired the status of an immigrant or permanent resident of another country?</div>		<div><div><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div><div>If YES, give details (country):</div><div></div></div>												
<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:</div> <div>a. Are you a member of any indigenous group?</div> <div>b. Are you a person with disability?</div> <div>c. Are you a solo parent?</div>		<div><div><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div><div>If YES, please specify:</div><div></div></div> <div><div><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div><div>If YES, please specify ID No</div><div></div></div> <div><div><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div><div>If YES, please specify ID No</div><div></div></div>												
<div>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</div> <table><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>Junrey Bacus</td><td>Lapu-lapu City, Cebu</td><td>09324672256</td></tr><tr><td>Juswe Saligan</td><td>Tagbilaran, Bohol</td><td>09338592373</td></tr><tr><td></td><td></td><td></td></tr></tbody></table>			NAME	ADDRESS	TEL. NO.	Junrey Bacus	Lapu-lapu City, Cebu	09324672256	Juswe Saligan	Tagbilaran, Bohol	09338592373			
NAME	ADDRESS	TEL. NO.												
Junrey Bacus	Lapu-lapu City, Cebu	09324672256												
Juswe Saligan	Tagbilaran, Bohol	09338592373												
<div>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.</div>		<div><div><div>ID picture taken within the last 6 months 3.5 cm x 4.5 cm (passport size)</div><div>With full and handwritten name tag and signature over printed name</div><div>Computer generated or photocopied picture is not acceptable</div></div><div>PHOTO</div><div></div><div>Right Thumbmark</div></div>												
<div><div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i></div><div>Government Issued ID: <b>N/A</b></div><div>ID/License/Passport No.: <b>N/A</b></div><div>Date/Place of Issuance: <b>N/A</b></div></div>	<div><div></div><div>Signature (Sign inside the box)</div><div>07/12/2024</div><div>Date Accomplished</div></div>													
<div>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</div> <div></div> <div>Person Administering Oath</div>														