

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	Lor		
FIRST NAME	Letty Jean	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	Cayanong		
3. DATE OF BIRTH (mm/dd/yyyy)	09/20/1992	16. CITIZENSHIP	☒ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization Pls. indicate country:
4. PLACE OF BIRTH	Brgy. Pangasugan, Baybay City, 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	Purok 4 House/Block/Lot No. Street Pangasungan Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.51	ZIP CODE	6521
8. WEIGHT (kg)	60.00		
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS	Purok 4 House/Block/Lot No. Street Pangasungan Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6521
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	N/A	19. TELEPHONE NO.	N/A
13. SSS NO.	N/A	20. MOBILE NO.	917-305-6757
14. TIN NO.	N/A	21. E-MAIL ADDRESS (if any)	lettyjean.lor@vsu.edu.ph
15. AGENCY EMPLOYEE NO.	V01066		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Lor		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Michael	NAME EXTENSION (JR., SR)	Mikhael Rovstin Niklauz C. Lor	08/22/2013
MIDDLE NAME	Omillon		Michael Nikulaz C. Lor	01/26/2016
OCCUPATION	Account Developer / Collector			
EMPLOYER/BUSINESS NAME	Transcycle Baybay City Branch			
BUSINESS ADDRESS	Baybay City, Leyte			
TELEPHONE NO.				
24. FATHER'S SURNAME	Cayanong			
FIRST NAME	Jaime	NAME EXTENSION (JR., SR) Sr.		
MIDDLE NAME	Bation			
25. MOTHER'S MAIDEN NAME	Angelita B. Argallon			
SURNAME	Cayanong			
FIRST NAME	Angelita			
MIDDLE NAME	Argallon		(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	Albuera South Central School	Elementary	1998	2005		2005	N/A
SECONDARY	Visayas State University Laboratory High School	High School	2005	2009		2009	N/A
VOCATIONAL/ TRADE COURSE	N/A						
COLLEGE	N/A						
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/31/2023
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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		
	Baybay Dairy Cooperative Visayas State University	03/22/2018	03/23/2018	6	Facilitator for the conduct of Gender Sensitivity Training
	Guadalupe Consumers Cooperative Brgy. Guadalupe, Baybay City, Leyte	03/14/2017	03/15/2017	6	Facilitator for the conduct of Gender Sensitivity Training

(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 (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Creative Writing	Auditor - University Supreme Student Council	Women and Gender Studies Association of the Philippines
Good command in planning & organizing job	President - College of Forestry and Natural Resources Supreme Student Council	VSU ADMINISTRATIVE PERSONNEL ASSOCIATION (VSU-ADPA)
• Computer Literate (MS word, excel, ppt presentation) • Good in communication Skills		Eastern Visayas Association of GAD Focal Persons
Travelling and Visiting/Understanding different places and cultures		Gamma Sigma Fraternity
Gender Mainstreaming		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/31/2023
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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 ☐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: _____													
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>Louella C. Ampac</td><td>Visayas State University</td><td></td></tr><tr><td>Lilian B. Nunez</td><td>Gabas, Baybay City, Leyte</td><td>565-0600loc1049</td></tr><tr><td>Maria Aurora Teresita W. Tabada</td><td>VSU, Baybay City, Leyte</td><td>565-0600loc1049</td></tr></table>			NAME	ADDRESS	TEL. NO.	Louella C. Ampac	Visayas State University		Lilian B. Nunez	Gabas, Baybay City, Leyte	565-0600loc1049	Maria Aurora Teresita W. Tabada	VSU, Baybay City, Leyte	565-0600loc1049	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 Right Thumbmark	
NAME	ADDRESS	TEL. NO.														
Louella C. Ampac	Visayas State University															
Lilian B. Nunez	Gabas, Baybay City, Leyte	565-0600loc1049														
Maria Aurora Teresita W. Tabada	VSU, Baybay City, Leyte	565-0600loc1049														
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: N/A ID/License/Passport No.: N/A Date/Place of Issuance: N/A Signature (Sign inside the box) 01/31/2023 Date Accomplished																
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above. Person Administering Oath																