

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	Gapasin		
FIRST NAME	Bryan	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	Ranches		
3. DATE OF BIRTH (mm/dd/yyyy)	03/24/1979	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	Baybay, leyte	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	#74 Kilbourne Street House/Block/Lot No. Street Visayas State University Pangasungan Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.68	ZIP CODE	6521
8. WEIGHT (kg)	92.00		
9. BLOOD TYPE	B+	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) 563-7412
14. TIN NO.	N/A	20. MOBILE NO.	950-414-2556
15. AGENCY EMPLOYEE NO.	V01122	21. E-MAIL ADDRESS (if any)	bryan.gapasin@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Dimalig		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Ciedelle Honey Lou	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	Sumaljag			
OCCUPATION	Insturctor			
EMPLOYER/BUSINESS NAME	Visayas State University			
BUSINESS ADDRESS	College of Nursing, VSU, Baybay City, Leyte			
TELEPHONE NO.				
24. FATHER'S SURNAME	Gapasin			
FIRST NAME	Ruben	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Madayag			
25. MOTHER'S MAIDEN NAME	Ranches			
SURNAME	Gapasin			
FIRST NAME	Myrna			
MIDDLE NAME	Ranches		(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	VISCA FOUNDATION ELEMENTARY SCHOOL	Elementary	1986	1992		1992	N/A
SECONDARY	Visca Laboratory High School	High School	1992	1996		1996	N/A
VOCATIONAL/ TRADE COURSE	JEFSPA	Organic Agriculture - NCII	2018	2019		2019	N/A
COLLEGE	VISAYAS STATE UNIVERSITY- MAIN CAMPUS	Bachelor of Science in Agribusiness	1997	2000		2000	N/A
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	Master of Science in Agricultural Economics	2001	2015	42 units	2015	N/A
PLEASE SEE ATTACHMENT A							
(Continue on separate sheet if necessary)							
SIGNATURE			DATE		05/02/2024		

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	VISAYAS STATE UNIVERSITY	Master in Management (Major in Agribusiness)	2017	2019		2019	CHED K-12
(Continue on separate sheet if necessary)								
SIGNATURE				DATE		05/02/2024		

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			
	Training Workshop on Research Proposal Writing	03/11/2024	03/12/2024	16	Technical	Office of the VP for Research, Extension and Innovation
	Introduction to Academic Writing	01/31/2024	04/10/2024	8	Technical	ACIAR thru ACIAR Learn - ACIAR Online Platform
	Research in the Field	01/17/2024	04/17/2024	8	Technical	ACIAR thru ACIAR Learn - ACIAR Online Platform
	Extension Training-Workshop: Developing VSU Extension Proposal	11/23/2022	11/25/2022	24	Technical	Office of the Director for Extension
	ONLINE Training on Advanced Methods for Impact Assessment of R&D and Technology Transfer Programs in Agriculture, Aquatic and Natural Resources	08/22/2022	08/24/2022	24	Technical	DOST PCAARRD

(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		N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	05/02/2024
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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</div><div><input type="checkbox"/> NO</div></div> <div><div><input type="checkbox"/> YES</div><div><input 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</div><div><input type="checkbox"/> NO</div></div> <div>If YES, give details:</div> <div></div> <div><div><input type="checkbox"/> YES</div><div><input type="checkbox"/> NO</div></div> <div>If YES, give details:</div> <div>Date Filed: <div></div></div> <div>Status of Case/s: <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</div><div><input type="checkbox"/> NO</div></div> <div>If YES, give details:</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</div><div><input type="checkbox"/> NO</div></div> <div>If YES, give details:</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</div><div><input type="checkbox"/> NO</div></div> <div>If YES, give details:</div> <div></div> <div><div><input type="checkbox"/> YES</div><div><input type="checkbox"/> NO</div></div> <div>If YES, give details:</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</div><div><input type="checkbox"/> NO</div></div> <div>If YES, give details (country):</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</div><div><input type="checkbox"/> NO</div></div> <div>If YES, please specify:</div> <div><div><input type="checkbox"/> YES</div><div><input type="checkbox"/> NO</div></div> <div>If YES, please specify ID No</div> <div><div><input type="checkbox"/> YES</div><div><input type="checkbox"/> NO</div></div> <div>If YES, please specify ID No</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></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></tbody></table>			NAME	ADDRESS	TEL. NO.									
NAME	ADDRESS	TEL. NO.												
<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>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>PHOTO</div><div></div><div>Right Thumbmark</div></div>												
<div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: N/A</div> <div>ID/License/Passport No.: N/A</div> <div>Date/Place of Issuance: N/A</div>	<div></div> <div>Signature (Sign inside the box)</div> <div>05/02/2024</div> <div>Date Accomplished</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>														