

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	TRIPOLE														
FIRST NAME	MARK RYAN	NAME EXTENSION (JR., SR) N/A													
MIDDLE NAME	ROSAL														
3. DATE OF BIRTH (mm/dd/yyyy)	03/25/1989	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: United Arab Emirates												
4. PLACE OF BIRTH	Dubai, UAE	If holder of dual citizenship, please indicate the details.													
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	<table><tr><td>House/Block/Lot No.</td><td>Street</td></tr><tr><td colspan="2">Seguinon</td></tr><tr><td>Subdivision/Village</td><td>Barangay</td></tr><tr><td>ALBUERA</td><td>LEYTE</td></tr><tr><td>City/Municipality</td><td>Province</td></tr><tr><td colspan="2">6542</td></tr></table>	House/Block/Lot No.	Street	Seguinon		Subdivision/Village	Barangay	ALBUERA	LEYTE	City/Municipality	Province	6542	
House/Block/Lot No.	Street														
Seguinon															
Subdivision/Village	Barangay														
ALBUERA	LEYTE														
City/Municipality	Province														
6542															
7. HEIGHT (m)	1.70	18. PERMANENT ADDRESS													
8. WEIGHT (kg)	84.00														
9. BLOOD TYPE	A+														
10. GSIS ID NO.	N/A														
11. PAG-IBIG ID NO.	N/A														
12. PHILHEALTH NO.	N/A	ZIP CODE	6542												
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A												
14. TIN NO.	N/A	20. MOBILE NO.	920-119-6784												
15. AGENCY EMPLOYEE NO.	V02063	21. E-MAIL ADDRESS (if any)	mark.tripole@vsu.edu.ph												

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Clavejo-Tripole		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Marjorie	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	Mabale			
OCCUPATION	Junior High School Teacher			
EMPLOYER/BUSINESS NAME	DepEd - Seguinon National High School			
BUSINESS ADDRESS	Seguinon, Albuera, Leyte			
TELEPHONE NO.	09204249271			
24. FATHER'S SURNAME	Marieto			
FIRST NAME	Tripole	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Cabintoy			
25. MOTHER'S MAIDEN NAME	Nympha Sotto Rosal			
SURNAME	Tripole			
FIRST NAME	Nympha			
MIDDLE NAME	Rosal		(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	N/A						
SECONDARY	N/A						
VOCATIONAL/ TRADE COURSE	N/A						
COLLEGE	VISAYAS STATE UNIVERSITY	Bachelor of Science in Chemistry	2013	2017		2017	N/A
GRADUATE STUDIES	University of San Carlos	Master of Science in Chemistry	2019	2022		2022	N/A

PLEASE SEE ATTACHMENT A			
(Continue on separate sheet if necessary)			
SIGNATURE		DATE	02/29/2024

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	Palompon Institute of Technology	Doctor of Philosophy in Education Managment	2022		12		
(Continue on separate sheet if necessary)							
SIGNATURE			DATE		02/29/2024		

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)

[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)
Computer Literate (MS Word, Excel, PPT presentation)	DOST-SEI ASTHRDP	University of San Carlos Alumni Association
Density Functional Theory (Materials Modelling)	2018 日本語 (JLPT – Japanese Language Proficiency Test) N3 級 (Intermediate Level)	VSU Alumni Association
Molecular Docking		
Musical Instruments (Guitar and Drums)		
Language Learning		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	02/29/2024
------------------	--	-------------	------------

<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, a. within the third degree? 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>If YES, give details: _____</div></div>												
<div>35. a. Have you ever been found guilty of any administrative offense? 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><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: Date Filed: _____ 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<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</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 checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div><div>If YES, give details: _____ Graduate studies</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)? 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><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</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<input checked="" type="checkbox"/> NO</div><div>If YES, give details (country): _____</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: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?</div>		<div><div><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></div></div>												
<div>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</div> <table><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr><tr><td>REINA JEAN ASDILLO</td><td>PDEA ROVII, CEBU CITY</td><td>0909-220-6696</td></tr><tr><td>CANDELARIO CALIBO</td><td>VSU, BAYBAY CITY, LEYTE</td><td>0917-634-1486</td></tr><tr><td>ELIZABETH S. QUEVEDO</td><td>VSU, BAYBAY CITY, LEYTE</td><td>0917-890-5658</td></tr></table>			NAME	ADDRESS	TEL. NO.	REINA JEAN ASDILLO	PDEA ROVII, CEBU CITY	0909-220-6696	CANDELARIO CALIBO	VSU, BAYBAY CITY, LEYTE	0917-634-1486	ELIZABETH S. QUEVEDO	VSU, BAYBAY CITY, LEYTE	0917-890-5658
NAME	ADDRESS	TEL. NO.												
REINA JEAN ASDILLO	PDEA ROVII, CEBU CITY	0909-220-6696												
CANDELARIO CALIBO	VSU, BAYBAY CITY, LEYTE	0917-634-1486												
ELIZABETH S. QUEVEDO	VSU, BAYBAY CITY, LEYTE	0917-890-5658												
<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) With full and handwritten name tag and signature over printed name Computer generated or photocopied picture is not acceptable</div><div>PHOTO</div></div><div><div></div><div>Right Thumbmark</div></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: N/A</div><div>ID/License/Passport No.: N/A</div><div>Date/Place of Issuance: N/A</div></div>	<div><div></div><div>Signature (Sign inside the box)</div><div>02/29/2024</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><div>Person Administering Oath</div></div>														