

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	Codog			
FIRST NAME	Jannet Leslie Evelyn	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	Sabijon			
3. DATE OF BIRTH (mm/dd/yyyy)	07/01/1987	16. CITIZENSHIP	☒ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization Pls. indicate country:	
4. PLACE OF BIRTH	Baybay	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		
7. HEIGHT (m)	1.49	ZIP CODE	House/Block/Lot No. Street Pangasungan	
8. WEIGHT (kg)	56.00		Subdivision/Village Barangay BAYBAY LEYTE	
9. BLOOD TYPE	A+		City/Municipality Province 6521	
10. GSIS ID NO.	2006225639		18. PERMANENT ADDRESS	
11. PAG-IBIG ID NO.	121201474619		ZIP CODE	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
12. PHILHEALTH NO.	130001031466			
13. SSS NO.	N/A	19. TELEPHONE NO.		N/A
14. TIN NO.	433960464	20. MOBILE NO.	928-080-6514	
15. AGENCY EMPLOYEE NO.	V02088	21. E-MAIL ADDRESS (if any)	jannetleslie.codog@vsu.edu.ph	

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	CODOG			
FIRST NAME	RITO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	SORIA			
25. MOTHER'S MAIDEN NAME	CAÑETE			
SURNAME	CODOG			
FIRST NAME	ADELA			
MIDDLE NAME	SABIJON		(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	Pangasugan Elementary School	Elementary	1994	2000		2000	N/A
SECONDARY	Bunga National High Shool	High School	2000	2004		2004	N/A
VOCATIONAL/ TRADE COURSE	N/A						
COLLEGE	N/A						
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	05/28/2025
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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			
	Basic Course Training on the RA 9184 and its Revised Implementing Rules and Regulation Act of 2016	11/26/2024	11/28/2024	24	Technical	VSU Learning, Development, and Human Resource Accreditation Office
	Enhancing Digital Communication: VOIP Phone Mastery and Output Messenger Transition	11/20/2024	11/20/2024	4	Technical	Department of Information and Communications Technology
	Seminar on Creating a Positive Workplace for VSU Employees: Integrating Physical and Mental Health Wellness	09/27/2024	09/27/2024	4	Technical	VSU Learning, Development, and Human Resource Accreditation Office
	ISO 9001:215 RE-AWARENESS AND AWARENESS SEMINAR	09/09/2024	09/09/2024	4	Technical	Visayas State University-QAC
	Shaping Culture: Embracing Values for Productive Workplace Performance	05/15/2024	05/15/2024	8	Technical	VSU Learning, Development, and Human Resource Accreditation Office
	Sparkling Spaces: Mastering the Art of Housekeeping	03/26/2024	03/26/2024	8	Technical	VSU Learning, Development, and Human Resource Accreditation Office
	Women Inspiring Women	03/22/2024	03/22/2024	4	Technical	Gender and Development, Visayas State University
	Regional Seminar-Workshop on Basic Records and Archives Management	02/20/2024	02/22/2024	24	Technical	National Archives of the Philippines
	Working Towards Personal Effectiveness	08/22/2023	08/25/2023	32	Technical	Personnel Officers Association of the Philippines, Inc
	Mental Health Wellness Seminar	04/25/2023	04/25/2023	4	Technical	VSU Learning, Development, and Human Resource Accreditation Office
	ISO 9001:2015 Awareness/Re-awareness Virtual Seminar	02/15/2023	02/15/2023	4	Technical	Office of the President, Visayas State University
	Re-Orientation of Employees' Duties and Responsibilities and Good Customer Service	09/23/2021	09/23/2021	4	Technical	Office of the Director of Human Resource Management
	ISO 9001:2015 Awareness/ Re-awareness Webinar	11/27/2020	11/27/2020	4	Technical	Quality Assurance Center, Visayas State University
	Document Tracking System	11/13/2020	11/13/2020	3	Technical	Human Resource Information System, Visayas State University
	Basic Life Support (CPR & AED)	11/29/2017	11/29/2017	8	Technical	American Safety & Health Institute
	HIV in the Workplace Seminar	12/09/2016	12/09/2016	4	Technical	VSU Hospital
	Reorientation of Department/Office Secretaries	11/15/2016	11/15/2016	8	Technical	Office of the Director of Human Resource and Development

PLEASE SEE ATTACHMENT A

(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)
	Driving		N/A		Visayas State University Credit Cooperative
	Computer Literate				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	05/28/2025
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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 If YES, give details: _____ ☐ 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>Joel Rey U. Acob</td><td>Brgy. Maybog, Baybay City</td><td>09569161146</td></tr><tr><td>Miriam De la Torre</td><td>Visayas State Univeristy</td><td>09773350599</td></tr><tr><td>Raymund M. Igcasama</td><td>BayBay City</td><td>09985663919</td></tr></table>			NAME	ADDRESS	TEL. NO.	Joel Rey U. Acob	Brgy. Maybog, Baybay City	09569161146	Miriam De la Torre	Visayas State Univeristy	09773350599	Raymund M. Igcasama	BayBay City	09985663919
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Raymund M. Igcasama	BayBay City	09985663919												
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.		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												
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i> Government Issued ID: PAGIBIG ID/License/Passport No.: 121201474619 Date/Place of Issuance: 11/30/-0001 / Ormoc City	Signature (Sign inside the box) 05/28/2025 Date Accomplished													
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above. Person Administering Oath														