

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	Deluza														
FIRST NAME	Jeanie Rose	NAME EXTENSION (JR., SR) N/A													
MIDDLE NAME	Suase														
3. DATE OF BIRTH (mm/dd/yyyy)	11/27/1995	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: Philippines												
4. PLACE OF BIRTH	Butuan City	If holder of dual citizenship, please indicate the details.													
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female														
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input 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></td><td>Bunga</td></tr><tr><td>Subdivision/Village</td><td>Barangay</td></tr><tr><td>BAYBAY</td><td>LEYTE</td></tr><tr><td>City/Municipality</td><td>Province</td></tr><tr><td colspan="2">ZIP CODE 6521</td></tr></table>	House/Block/Lot No.	Street		Bunga	Subdivision/Village	Barangay	BAYBAY	LEYTE	City/Municipality	Province	ZIP CODE 6521	
House/Block/Lot No.	Street														
	Bunga														
Subdivision/Village	Barangay														
BAYBAY	LEYTE														
City/Municipality	Province														
ZIP CODE 6521															
7. HEIGHT (m)	1.58	18. PERMANENT ADDRESS													
8. WEIGHT (kg)	50.00														
9. BLOOD TYPE	B+														
10. GSIS ID NO.	N/A														
11. PAG-IBIG ID NO.	N/A														
12. PHILHEALTH NO.	N/A	ZIP CODE													
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A												
14. TIN NO.	725592437	20. MOBILE NO.	928-349-6546												
15. AGENCY EMPLOYEE NO.	V02140	21. E-MAIL ADDRESS (if any)	jeanie.deluza@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	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	N/A			
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	N/A			
25. MOTHER'S MAIDEN NAME	AMANTE			
SURNAME	DELUZA			
FIRST NAME	JESA			
MIDDLE NAME	SUASE		(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	San Roque Elementary School	Elementary	2004	2009		2009	N/A
SECONDARY	Hingaturan National High School	Secondary Education	2009	2013		2013	N/A
VOCATIONAL/ TRADE COURSE	N/A						
COLLEGE	Visayas State University	Bachelor of Science in Development Communication (Major in Educational Communication Technology)	2014	2018		2018	Cum Laude
GRADUATE STUDIES	Visayas State University	Master of Science in Development Communication	2020	2022		2022	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/13/2025
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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			
	36th Join ViCARP and AFRREDN Regional Research, Development and Extension Symposium	11/27/2024	11/28/2024	16	Research	ViCARP and RRDEN
	Orientation/Re-Orientation and Training on Suicide Prevention	10/16/2024	10/16/2024	8	Supervisory	Office of the Vice President for Student Affairs and Services
	Training Workshop on Writing High-Impact Publications	10/08/2024	10/10/2024	24	Research	OVPREI - Director for Research
	Training on Collection and Use of Sex-Disaggregated Data (SDD) and/or Gender Statistics	09/24/2024	09/26/2024	24	Research	DOST-PCAARRD
	Gender Analysis (GA) and Use of GA Tools for R&D Management and Implementation	08/20/2024	08/22/2024	24	Research	DOST PCAARRD
	Seminar-Workshop on Cultural Mapping of VSU Heritage Properties	03/14/2024	03/15/2024	16	Research	Culture and the Arts Center (CAC) - VSU Main
	Lab Safety and Equipment Care Workshop-Seminar	01/23/2024	01/23/2024	8	Technical	Philippine Rootcrop Research and Training Center

(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	01/13/2025
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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, 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 type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div><div>If YES, give details: _____</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><div><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div><div>If YES, give details: _____</div></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><div><div><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div><div>If YES, please specify ID No _____</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>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>ANTONIO A. ABAMO</td><td>Baybay City, Leyte</td><td>09176341462</td></tr><tr><td>JED ASAPH D. CORTES</td><td>Baybay City, Leyte</td><td>09178363626</td></tr><tr><td>MARLON M. TAMBIS</td><td>Baybay City, Leyte</td><td>09397209796</td></tr></table>			NAME	ADDRESS	TEL. NO.	ANTONIO A. ABAMO	Baybay City, Leyte	09176341462	JED ASAPH D. CORTES	Baybay City, Leyte	09178363626	MARLON M. TAMBIS	Baybay City, Leyte	09397209796
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<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: TIN</div><div>ID/License/Passport No.: 725592437</div><div>Date/Place of Issuance: 07/11/2018 / Ormoc City</div></div>	<div><div></div><div>Signature (Sign inside the box)</div><div>01/13/2025</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>														