

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	Seco		
FIRST NAME	Mari Neila	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	Platino		
3. DATE OF BIRTH (mm/dd/yyyy)	11/12/1996	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 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	Purok 2 House/Block/Lot No. Street Pangasungan Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.60	ZIP CODE	6521
8. WEIGHT (kg)	60.00		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	Purok 2 House/Block/Lot No. Street Pangasungan Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
10. GSIS ID NO.	2006337066	ZIP CODE	6521
11. PAG-IBIG ID NO.	121296405380		
12. PHILHEALTH NO.	130254698882		
13. SSS NO.	0644507532	19. TELEPHONE NO.	N/A
14. TIN NO.	750778131000	20. MOBILE NO.	916-102-9015
15. AGENCY EMPLOYEE NO.	V02198	21. E-MAIL ADDRESS (if any)	marineila.seco@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Quintos		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Phillip Anthony	NAME EXTENSION (JR., SR)	Anaiah Maureen S. Quintos	01/08/2025
MIDDLE NAME	Lawas			
OCCUPATION	Self-employed			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	Purok 4, San Antonio, Bay, Laguna			
TELEPHONE NO.				
24. FATHER'S SURNAME	Seco			
FIRST NAME	Arnel	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Bilbao			
25. MOTHER'S MAIDEN NAME	Maria Helen J. Platino			
SURNAME	Seco			
FIRST NAME	Maria Helen			
MIDDLE NAME	Platino		(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	Villa Elementary School	Elementary	2002	2008		2008	Salutatorian
SECONDARY	Visayas State University Laboratory High School	High School	2008	2012		2012	N/A
VOCATIONAL/ TRADE COURSE	Visayas State University	Certificate of Agricultural Science (BSA Ladderized Program)	2012	2014		2014	N/A
COLLEGE	Visayas State University	Bachelor of Science in Agriculture (Major in Plant Protection)	2012	2016		2016	Magna Cum Laude
GRADUATE STUDIES	University of the Philippines - Los Banos	Master of Science in Plant Pathology (Major in Plant Pathology)	2016	2019		2019	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	05/14/2025
-----------	--	------	------------

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		
	Plant Protection Majors Association Visayas State University	06/01/2015	04/11/2016	1	Treasurer

(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			
	N/A	N/A	N/A	N/A	N/A	N/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)
	N/A		N/A		Philippine Phytopathological Association

(Continue on separate sheet if necessary)

SIGNATURE		DATE	05/14/2025
-----------	--	------	------------

<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>Mark Angelo O. Balendres</td><td>De La Salle University</td><td>09953591870</td></tr><tr><td>Lucia M. Borines</td><td></td><td></td></tr><tr><td>Maria Juliet Ceniza</td><td>Visayas State University</td><td></td></tr></table>			NAME	ADDRESS	TEL. NO.	Mark Angelo O. Balendres	De La Salle University	09953591870	Lucia M. Borines			Maria Juliet Ceniza	Visayas State University	
NAME	ADDRESS	TEL. NO.												
Mark Angelo O. Balendres	De La Salle University	09953591870												
Lucia M. Borines														
Maria Juliet Ceniza	Visayas State University													
<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: PASSPORT</div><div>ID/License/Passport No.: P2543669B</div><div>Date/Place of Issuance: 07/15/2019 / DFA San Pablo</div></div>	<div><div></div><div>Signature (Sign inside the box)</div><div>05/14/2025</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>														