

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	Bandalan-Salazar		
FIRST NAME	Marz Pauline	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	Guio-guio		
3. DATE OF BIRTH (mm/dd/yyyy)	01/13/1995	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:
4. PLACE OF BIRTH		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 type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	San Roque House/Block/Lot No. Street Tinago Subdivision/Village Barangay INOPACAN LEYTE City/Municipality Province
7. HEIGHT (m)	1.61	ZIP CODE	6522
8. WEIGHT (kg)	90.00		
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS	San Roque House/Block/Lot No. Street Tinago Subdivision/Village Barangay INOPACAN LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6522
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	N/A	19. TELEPHONE NO.	N/A
13. SSS NO.	N/A	20. MOBILE NO.	969-572-0139
14. TIN NO.	N/A	21. E-MAIL ADDRESS (if any)	marzpauline.salazar@vsu.edu.ph
15. AGENCY EMPLOYEE NO.	V02737		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Salazar		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Che	NAME EXTENSION (JR., SR)	Theoden B. Salazar	12/23/2020
MIDDLE NAME	Morot			
OCCUPATION	Engineer			
EMPLOYER/BUSINESS NAME	Smart Communications			
BUSINESS ADDRESS	Makati City			
TELEPHONE NO.				
24. FATHER'S SURNAME	Bandalan			
FIRST NAME	Ramon	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Bravo			
25. MOTHER'S MAIDEN NAME	Ophilia P. Guio-guio			
SURNAME	Guio-guio			
FIRST NAME	Ophilia			
MIDDLE NAME	Pluma		(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	Mindanao State University- Iligan Institute Technology	Bachelor in Elementary Education	2011	2015		2015	Cum Laude
GRADUATE STUDIES	Southern Leyte State University	Master of Arts in Teaching	2019	2022		2022	N/A

PLEASE SEE ATTACHMENT A			
(Continue on separate sheet if necessary)			
SIGNATURE		DATE	09/04/2025

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	CEBU NORMAL UNIVERSITY	Master of Arts in Education-Early Childhood Education	2024		6 units		
(Continue on separate sheet if necessary)								
SIGNATURE				DATE		09/04/2025		

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		
	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			
	ARCHERS 2025	04/10/2025	04/11/2025	16	Instruction	De la Salle University
	Connecting Hearts and Minds: Discovering Social and Emotional Learning	11/26/2024	11/26/2024	8	Instruction	ECCD Council
	BASIC COMPUTER LITERACY TRAININIG	06/20/2022	07/01/2022	80	Technical	JE MONDEJAR COMPUTER COLLEGE
	TRAINING-WORSHOP ON ASSESSMENT IN HIGHER EDUCATION: CREATION OF TABLE OF SPECIFICATIONS	11/05/2021	11/05/2021	8	Instruction	"Visayas State University (VSU), Visca, Baybay City, Leyte "
	GOOGLE CLASSROOM WORKSHOP SERIES	12/12/2019	12/13/2019	16	Instruction	"Visayas State University (VSU), Visca, Baybay City, Leyte "

(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	09/04/2025
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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> <div>If YES, give details: _____</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><input type="checkbox"/>YES<input checked="" type="checkbox"/>NO</div></div> <div>If YES, give details: _____ Date Filed: _____ Status of Case/s: _____</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>Arlene Jen Avellana</td><td>Mahaplag Leyte</td><td>09654882261</td></tr><tr><td>Bayron S. Barredo</td><td>Visca Baybay Leyte</td><td>563-7527</td></tr><tr><td></td><td></td><td></td></tr></table>						NAME	ADDRESS	TEL. NO.	Arlene Jen Avellana	Mahaplag Leyte	09654882261	Bayron S. Barredo	Visca Baybay Leyte	563-7527			
NAME	ADDRESS	TEL. NO.															
Arlene Jen Avellana	Mahaplag Leyte	09654882261															
Bayron S. Barredo	Visca Baybay Leyte	563-7527															
<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> Government Issued ID: N/A ID/License/Passport No.: N/A Date/Place of Issuance: N/A</div></div>			<div><div></div><div>Signature (Sign inside the box) 09/04/2025 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>																	