

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	Santos		
FIRST NAME	Frances Ann	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	Arbiol		
3. DATE OF BIRTH (mm/dd/yyyy)	10/19/1987	16. CITIZENSHIP	☒ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization Pls. indicate country:
4. PLACE OF BIRTH	Baybay Leyte	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	NA House/Block/Lot No. Street NA Santo Rosario Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.51	ZIP CODE	6521
8. WEIGHT (kg)	59.00		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	NA House/Block/Lot No. Street NA Santo Rosario Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6521
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	N/A		
13. SSS NO.	N/A	19. TELEPHONE NO.	(097) 7656-5478
14. TIN NO.	N/A	20. MOBILE NO.	097-765-6547
15. AGENCY EMPLOYEE NO.	VJO00743	21. E-MAIL ADDRESS (if any)	fasantos@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Santos		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Christian	NAME EXTENSION (JR., SR)	Jorgina Liane Arbiol	12/15/2009
MIDDLE NAME	Alkuino		Jaliyah Dianna Laine Arbiol Santos	02/26/2018
OCCUPATION	Admin Aid I		Jorge Leo-Tanz Arbiol Santos	12/11/2020
EMPLOYER/BUSINESS NAME	Visayas State University			
BUSINESS ADDRESS	Visca, Brgy. Pangasugan, Baybay, Leyte			
TELEPHONE NO.				
24. FATHER'S SURNAME	Arbiol			
FIRST NAME	William	NAME EXTENSION (JR., SR) Jr.		
MIDDLE NAME	Ibona			
25. MOTHER'S MAIDEN NAME	Leslie Duran Maglasang			
SURNAME	Arbiol			
FIRST NAME	Leslie			
MIDDLE NAME	Maglasang		(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	Franciscan College of Immaculate Conception	Elementary	1993	2000		2000	
SECONDARY	Franciscan College of Immaculate Conception	High School	2000	2004		2004	
VOCATIONAL/ TRADE COURSE	N/A						
COLLEGE	University of San Carlos	Bachelor of Science in Nursing	2004	2008		2008	
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/03/2023
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IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/03/2023
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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			
	Disaster Risk Reduction and Management (DRRM) Training/Workshop	11/09/2022	11/11/2022	24	Instruction	Office of the Civil Defense Region 8
	Seminar on Data Privacy	04/07/2022	04/07/2022	8	Instruction	"Visayas State University (VSU), Visca, Baybay City, Leyte "
	Virtual Orientation on CSC and VSU Rewards and Recognition Programs	02/28/2022	02/28/2022	8	Instruction	Office of the Human Resource Management, VSU
	Re-orientation webinar of Employees' Duties and Responsibilities and Good Customer Service	09/23/2021	09/23/2021	8	Instruction	Office of the Director for Human Resource Management, Visayas State University
	Human Resource Management Information System (HRMIS) Presentation and Training of the Developed Recruitment, Selection, and Placement (RSP), Personal Data Sheet (PDS), and Plantilla System	07/27/2021	07/28/2021	16	Technical	Human Resource Information System, Visayas State University
	Cyber Security Training	12/18/2019	12/19/2019	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	01/03/2023
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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> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table>			NAME	ADDRESS	TEL. NO.									
NAME	ADDRESS	TEL. NO.												
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: DL ID/License/Passport No.: H1211000070 Date/Place of Issuance: 08/20/2021 / Baybay	Signature (Sign inside the box) 01/03/2023 Date Accomplished													
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above. Person Administering Oath														