

PERSONAL DATA SHEET

Print legibly Mark appropriate boxes ☐ with * / * and use separate sheet if necessary 1. CS ID No. (to be filled y CSC)

I. PERSONAL INFORMATION			
2. SURNAME	C E S A R		
FIRST NAME	S E N O N A		
MIDDLE NAME	A R A Z O		3. NAME EXTENSION (e.g. Jr. Sr.)
4. DATE OF BIRTH (mm/dd/yyyy)	12	8	1970
5. PLACE OF BIRTH	Loay, Bohol		
6. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
7. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Annul <input type="checkbox"/> Others, specify _____		
8. CITIZENSHIP	Filipino		
9. HEIGHT (m)	1.56		
10. WEIGHT (kg)	66		
11. BLOOD TYPE	O'		
12. GSIS ID NO.	70120801970		
13. PAG-IBIG ID NO.	170000245711		
14. PHILHEALTH NO.	130000152707		
15. SSS NO.			
16. RESIDENTIAL ADDRESS	94 Warner Apt. Visayas State University, Visca, Baybay, Leyte		
17. TELEPHONE NO.	ZIP CODE		
18. PERMANENT ADDRESS	Calvario, Loay, Bohol		
19. TELEPHONE NO.	ZIP CODE		
20. E-MAIL ADDRESS (if any)	6521-A		
21. CELL PHONE NO. (if any)	053 563 7536		
22. AGENCY EMPLOYEE NO.	zeny.cesar@vsu.edu.ph		
23. TIN	9778179877		
	153 545 327		

II. FAMILY BACKGROUND			
24. SPOUSES' SURNAME	NA	25. NAME OF CHILDREN (Write full name and list all)	Date of Birth (mm/dd/yyyy)
FIRST NAME			/ /
MIDDLE NAME			/ /
OCCUPATION			/ /
EMPLOYER/BUS. NAME			/ /
BUSINESS ADDRESS			/ /
TELEPHONE NO.			/ /
(Continue on separate sheet if necessary)			/ /
26. FATHER'S SURNAME	C E S A R		/ /
FIRST NAME	D E L F I N		/ /
MIDDLE NAME	L A D A O		/ /
27. MOTHER'S MAIDEN NAME			/ /
SURNAME	A R A Z O		/ /
FIRST NAME	T A R C E L A		/ /
MIDDLE NAME	A B S O R D O		
(Continue on separate sheet if necessary)			

III. EDUCATIONAL BACKGROUND							
28.	LEVEL	NAME OF SCHOOL (Write in full)	DEGREE/ COURSE (Write in full)	YEAR GRADUATED (if graduated)	HIGHEST GRADE/ LEVEL/ UNITS EARNED (if not graduated)	INCLUSIVE DATES OF ATTENDANCE From To	SCHOLARSHIP ACADEMIC/ HONORS RECEIVED
	ELEMENTARY	Loay Central Elementary School	Elementary	1984		1978 1984	validetorian
	SECONDARY	Holy Trinity Academy	Secondary diploma	1988		1984 1988	salutatorian
	VOCATIONAL/ TRADE COURSE						
	COLLEGE	University of San Carlos	Bachelor of Science - Biology	1992		1988 1982	
	GRADUATE STUDIES	Vrije Universitet Brussel	MSc -Fundamental and Applied Marine Ecology	1997		1995 1997	wt honours
		University of San Carlos	PhD Biology- Marine Biology Track		36 units	2011	
(Continue on separate sheet if necessary)							

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC/NON-GOVERNMENT/PEOPLE/VOLUNTARY ORGANIZATIONS

31. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION/ NATURE OF WORK
	From	To		
Holy Spirit Parish	/ /	/ /	variable	service committee
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		

(Continue on separate sheet if necessary)

VII. TRAINING PROGRAMS (Start from the most recent training)

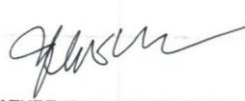
32. TITLE OF SEMINAR/CONFERENCE WORKSHOP/SHORT COURSES (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	CONDUCTED/ SPONSORED BY (Write in full)
	From	To		
see attached sheet	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

33. SPECIAL SKILLS/HOBBIES:	34. NON-ACADEMIC DISTINCTIONS/ RECOGNITION (Write in full)	35. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
SCUBA diver		Philippine Society of Biochemistry and Molecular Biology
computer literate		Philippine Society for Lactic Acid Bacteria (PSLAB), Inc.
active coral reef restoration practitioner		Association of Systematic Biologists in the Philippines
		Biodiversity Conservation Society of the Philippines
		Philippine Association of Marine Science

(Continue on separate sheet if necessary)

<p>36. Are you related by consanguinity or affinity to any of the following:</p> <p>a. Within the third degree (for NATIONAL GOVERNMENT Employees): appointing authority, recommending authority, chief of office/bureau/department or person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed?</p> <p>b. Within the fourth degree (for LOCAL GOVERNMENT Employees): appointing authority or recommending authority where you are appointed?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>_____</p> <p>_____</p>												
<p>37. a. Have you ever been formally charged?</p> <p>b. Have you ever been guilty of any administrative offense?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>_____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>_____</p> <p>_____</p>												
<p>38. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>_____</p> <p>_____</p>												
<p>39. 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, AWOL or phased out, in the public or private sector?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>_____</p> <p>_____</p>												
<p>40. Have you ever been a candidate in a national or local election (except Barangay election)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>_____</p> <p>_____</p>												
<p>41. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and © Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you differently abled?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, pls. specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, pls. specify: _____</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, pls. specify: _____</p>												
<p>42. REFERENCES (Person not related by consanguinity or affinity to applicant/ appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>DR. ANALYN M. MAZO</td> <td>DBS, VSU, VISCA, Baybay, Leyte</td> <td>0595637536</td> </tr> <tr> <td>DR. HUMBERTO R. MONTES</td> <td>ITEEM, VSU, Visca, Baybay, Leyte</td> <td>090847611</td> </tr> <tr> <td>DR. FILIPINA B. SOTTO</td> <td>Dept of Biology, USC, Talamban, Cebu City</td> <td>0917322195</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	DR. ANALYN M. MAZO	DBS, VSU, VISCA, Baybay, Leyte	0595637536	DR. HUMBERTO R. MONTES	ITEEM, VSU, Visca, Baybay, Leyte	090847611	DR. FILIPINA B. SOTTO	Dept of Biology, USC, Talamban, Cebu City	0917322195
NAME	ADDRESS	TEL. NO.											
DR. ANALYN M. MAZO	DBS, VSU, VISCA, Baybay, Leyte	0595637536											
DR. HUMBERTO R. MONTES	ITEEM, VSU, Visca, Baybay, Leyte	090847611											
DR. FILIPINA B. SOTTO	Dept of Biology, USC, Talamban, Cebu City	0917322195											
<p>43. I declare under oath that this Personnel Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines</p> <p>I also authorize the agency head/ authorized representative to verify/ validate the contents stated herein. I trust that this information shall remain confidential.</p>													
<p>1115729</p> <p>COMMUNITY TAX CERTIFICATE NO.</p> <p>Baybay, Leyte</p> <p>ISSUED AT</p> <p>Jan/ 25 /2017</p> <p>ISSUED ON (mm/dd/yy)</p>	<p style="text-align: center;">  SIGNATURE (Sign inside the box) </p> <p>January 27, 2017</p> <p>DATE ACCOMPLISHED</p>												
<p>RIGHT THUMBMARK</p>													