

# 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	CAINTIC		
FIRST NAME	PAULINE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	SALIGUE		
3. DATE OF BIRTH (mm/dd/yyyy)	7/12/1970	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	Maasin 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 type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated	17. RESIDENTIAL ADDRESS	
7. HEIGHT (m)	1.5 m		House/Block/Lot No. Street Zone 6 Guadalupe Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
8. WEIGHT (kg)	60 kg	ZIP CODE	6521
9. BLOOD TYPE	"A"	18. PERMANENT ADDRESS	
10. GSIS ID NO.	70071201471		House/Block/Lot No. Street Zone 6 Guadalupe Subdivision/Village Barangay Baybay City Leyte City/Municipality Province
11. PAG-IBIG ID NO.	1700-0027-2707	ZIP CODE	6521
12. PHILHEALTH NO.	13-000014337-6	19. TELEPHONE NO.	563-7458
13. SSS NO.	N/A	20. MOBILE NO.	09262953624
14. TIN NO.	161-560-784	21. E-MAIL ADDRESS (if any)	khun paula@yahoo.com
15. AGENCY EMPLOYEE NO.	V000661		

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Caintic	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Wenito	Caintic, Paula Wayne S.	10/13/2002
MIDDLE NAME	Alba	Caintic, Wayne Pocholo S.	5/17/2004
OCCUPATION	Training Assistant		
EMPLOYER/BUSINESS NAME	Agriculture Training Institute		
BUSINESS ADDRESS	Visca, Baybay City, Leyte		
TELEPHONE NO.	563-7635		
24. FATHER'S SURNAME	Saligue		
FIRST NAME	Nemesio	NAME EXTENSION (JR., SR)	
MIDDLE NAME	Machado		
25. MOTHER'S MAIDEN NAME			
SURNAME	Castañares		
FIRST NAME	Isabelita		
MIDDLE NAME	Abocejo		

(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 Rafael Elementary School, Maasin So. Leyte	Primary Education	1977	1983		1983	
SECONDARY	San Rafael Brgy High School, Maasin So. Leyte	High School	1983	1987		1987	
COLLEGE	Visayays State College of Agriculture	BS Agriculture	1987	1991		1991	
GRADUATE STUDIES	Visayas State University	Masters of Management	2013	2017		2017	
	Masaryk University, Czech Republic	Master Exchange	2015	2016	21 ECTS		

(Continue on separate sheet if necessary)

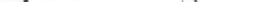
SIGNATURE		DATE	NW. 19. 2018
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[illegible]

**V. WORK EXPERIENCE**  
 include private employment. Start from your recent work. Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

SIGNATURE		DATE	Nov. 19, 2018
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## VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC, NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	VSU Credit Cooperative				Member, Education Committee
	Kabalikat Civicom				Member

(Continue on separate sheet if necessary)

#### VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

(Continue on separate sheet if necessary)

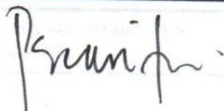
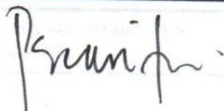
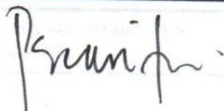






## VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Coordination & facilitation		VSU Credit Cooperative
Word Processing		Secretariat, VSU Bids and Awards Committee
		Kabalikat Civicom
		VSU Faculty Association

(Continue on separate sheet if necessary)

SIGNATURE	<i>[Signature]</i>	DATE	Nov. 19, 2019
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<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>Status of Case/s: _____</p>												
<p>36. 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>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?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>												
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>												
<p>41. 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: 35%;">NAME</th><th style="width: 35%;">ADDRESS</th><th style="width: 30%;">TEL. NO.</th></tr></thead><tbody><tr><td>Dr. Jose L. Bacusmo</td><td>VSU, Visca, Baybay City, Leyte</td><td>9173108076</td></tr><tr><td>Dr. Othello B. Capuno</td><td>VSU, Visca, Baybay City, Leyte</td><td>9369542182</td></tr><tr><td>Ms. Hazel Grace T. Taganas</td><td>ATI, Visca, Baybay City, Leyte</td><td>9178628433</td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	Dr. Jose L. Bacusmo	VSU, Visca, Baybay City, Leyte	9173108076	Dr. Othello B. Capuno	VSU, Visca, Baybay City, Leyte	9369542182	Ms. Hazel Grace T. Taganas	ATI, Visca, Baybay City, Leyte	9178628433
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<p>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.</p>													
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td></tr><tr><td>PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID: <b>GSIS</b></td></tr><tr><td>ID/License/Passport No.: <b>70071201471</b></td></tr><tr><td>Date/Place of Issuance:</td></tr></table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)	PLEASE INDICATE ID Number and Date of Issuance	Government Issued ID: <b>GSIS</b>	ID/License/Passport No.: <b>70071201471</b>	Date/Place of Issuance:	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: center; height: 100px;"> Signature (Sign inside the box) Date Accomplished: <b>Nov. 19, 2018</b></td></tr></table>	 Signature (Sign inside the box) Date Accomplished: <b>Nov. 19, 2018</b>						
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<p>SUBSCRIBED AND SWORN to before me this <b>NOV 27 2018</b>, affiant exhibiting his/her validly issued government ID as indicated above.</p> <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: center; height: 80px;"> <b>ATTY. RYSAN C. GUINOCOR</b> VSU Legal Officer</td></tr></table>		 <b>ATTY. RYSAN C. GUINOCOR</b> VSU Legal Officer											
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## WORK EXPERIENCE SHEET

**Instructions:** 1. Include only the work experiences relevant to the position being applied for.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word *Present*, e.g., 1998-Present. Work experience should be listed starting with the most recent/present employment

- Duration: March 2015 – present
  - Position: Instructor
  - Name of Office/Unit: ViCARP
  - Immediate Supervisor: Dr. Othello B. Capuno
  - Name of Agency/Organization and Location: Visayas State University
  - List of Accomplishments and Contributions (if any)
  - Summary of Actual Duties
    - Teaches assigned subject and performs other teaching related functions
    - Plan, coordinate and facilitate in the overall conduct of ViCARP activities and operations
- 
- Duration: May 2002 to February 2015
  - Position: Science Research Assistant
  - Name of Office/Unit: ViCARP
  - Immediate Supervisor: Dr. Othello B. Capuno
  - Name of Agency/Organization and Location: Visayas State University
  - List of Accomplishments and Contributions (if any)
    - Highly involved in the packaging of documents for a number of R&D awards
  - Summary of Actual Duties
    - Plan, coordinate and facilitate in the overall conduct of ViCARP activities and operations



**PAULINE S. CAINTIC**

(Signature over Printed Name  
of Employee/Applicant)

Date: \_\_\_\_\_