

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	GOFREDO		
FIRST NAME	DANILO		NAME EXTENSION (JR., SR) JR.
MIDDLE NAME	MISA		
3. DATE OF BIRTH (mm/dd/yyyy)	10/11/1995	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" 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.	
5. SEX	<input checked="" type="checkbox"/> Male <input 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	
7. HEIGHT (m)	1.65	House/Block/Lot No.	Street
8. WEIGHT (kg)	79	Subdivision/Village	HIBUNAWAN
9. BLOOD TYPE	B+	BAYBAY CITY	LEYTE
10. GSIS ID NO.		City/Municipality	Province
11. PAG-IBIG ID NO.	1212-0319-9283	ZIP CODE	6521
12. PHILHEALTH NO.	13-02-5281926-7	18. PERMANENT ADDRESS	
13. SSS NO.	NONE	House/Block/Lot No.	Street
14. TIN NO.	489-370-017	Subdivision/Village	HIBUNAWAN
15. AGENCY EMPLOYEE NO.		BAYBAY CITY	LEYTE
		City/Municipality	Province
		ZIP CODE	6521
		19. TELEPHONE NO.	NONE
		20. MOBILE NO.	09484498642
		21. E-MAIL ADDRESS (if any)	danilo.gofredo@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	GOFREDO		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NIFFA	NAME EXTENSION (JR., SR) Jr.	DANIELLA BLAIRE C. GOFREDO	12/19/2012
MIDDLE NAME	CALLEJA		MARKIFF DANN C. GOFREDO	08/20/2021
OCCUPATION	ADMIN AIDE III			
EMPLOYER/BUSINESS NAME	VISAYAS STATE UNIVERSITY			
BUSINESS ADDRESS	BAYBAY CITY, LEYTE			
TELEPHONE NO.				
24. FATHER'S SURNAME	GOFREDO			
FIRST NAME	DANILO	NAME EXTENSION (JR., SR) SR.		
MIDDLE NAME	CANETE			
25. MOTHER'S MAIDEN NAME				
SURNAME	MISA			
FIRST NAME	TERESITA			
MIDDLE NAME	MORATA			

(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	HIBUNAWAN ELEMENTARY SCHOOL	ELEMENTARY	1999	2005	N. A.	2008	N. A.
SECONDARY	ALTERNATIVE LEARNING SCHOOL	SECONDARY	2005	2009	N. A.	2017	NONE
VOCATIONAL / TRADE COURSE	N. A.		N. A.	NA	N. A.	N. A.	N. A.
COLLEGE							
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE

DATE

6-18-25

27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	BARANGAY ELIGIBILITY			PALO LEYTE		

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

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(Continue on separate sheet if necessary)

6-18-25

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		
	None	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			
	BASIC LIFE SUPPORT PROVIDER'S COURSE-LAY RESCUER	03/07/2022	03/08/2022			DOH
	STANDARD FIRST AID TRAINING-LAY RESCUER	03/09/2022	03/10/2022			DOH
	ELECTRICAL WIRING SYTEM REPAIR AND MAINTENANCE	04/13/2023	05/24/2023			VISAYAS STATE UNIVERSITY
	LANDSCAPE TRAINING	06/15/2023				VISAYAS STATE UNIVERSITY
	"TRANSFORMING PUBLIC SERVICE IN THE NEXT DECADE: HONING AGILE AND FUTURE-READY SERVANT HEROES"	09/17/2023				CIVIL SERVICE ANNIVERSARY
	5'S TRAINING FOR UTILITY AND MESSENGER PERSONNEL	11/23/2022				VISAYAS STATE UNIVERSITY
	GPPB BASIC COURSE TRAINING on the RA 9184 and its REVISED IMPLEMENTING RULES AND REGULATION ACT OF 2016	08/22/2023	08/24/2023			VISAYAS STATE UNIVERSITY
	SKILLS FOR LIFE TRAINING ON LEI MAKING	09/14/17	09/30/17			DEPED
	ISO 9001:2015 AWARENESS/RE-AWARENESS WEBINAR	09/13/2021				VISAYAS STATE UNIVERSITY
	ISO 9001:2015 AWARENESS/RE-AWARENESS SEMINAR	08/31/2022				VISAYAS STATE UNIVERSITY
	ISO 9001:2015 AWARENESS/RE-AWARENESS WEBINAR	11/27/2020				VISAYAS STATE UNIVERSITY
	"RECLAIMING PERSONAL EFFECTIVENESS: A JOURNEY TO SELF-EMPOWERMENT"	05/28/2024	05/30/2024			VISAYAS STATE UNIVERSITY
	"HANDS-ONLY CARDIOPULMONARY RESUSCITATION"	07/21/2022	07/22/2022			VISAYAS STATE UNIVERSITY
	"COACH - BASKETBALL TOURNAMENT-INTER-COLLEGIATE	03/05/2023	03/06/2023			SLSU


(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)
	Knowledgeable on Computer Operations (Microsoft Word, Excel, and Power Point)		N. A.		N.A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	6-18-24
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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 style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">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>ROTACIO S. GRAVOSO</td> <td>VSU BAYBAY, LEYTE</td> <td></td> </tr> <tr> <td>ALELI A. VILLOCINO</td> <td>VSU BAYBAY, LEYTE</td> <td></td> </tr> <tr> <td>ELWIN JAY V. YU</td> <td>VSU BAYBAY, LEYTE</td> <td></td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	ROTACIO S. GRAVOSO	VSU BAYBAY, LEYTE		ALELI A. VILLOCINO	VSU BAYBAY, LEYTE		ELWIN JAY V. YU	VSU BAYBAY, LEYTE	
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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>													
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<div style="text-align: right; margin-bottom: 10px;">PHOTO</div> <div style="text-align: center;">  <p>Right Thumbmark</p> </div>													
<p>SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="text-align: center; margin-top: 20px;"> <div style="border: 1px solid black; width: 200px; height: 40px; margin: 0 auto;"></div> <p>Person Administering Oath</p> </div>													