

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	ASILOM		
FIRST NAME	LARRY ANTHONY	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	CONCOLES		
3. DATE OF BIRTH (mm/dd/yyyy)	4/4/1987	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	BAYBAY LEYTE	if holder of dual citizenship, please indicate the details.	
5. SFX	<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	JOSE P. LAUREL House/Block/Lot No. Street DOMINGO C. VELOSO Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	5'5"	ZIP CODE	6521-A
8. WEIGHT (kg)	63		
9. BLOOD TYPE	"B+"	18. PERMANENT ADDRESS	JOSE P. LAUREL House/Block/Lot No. Street DOMINGO C. VELOSO Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
10. GSIS ID NO.	NONE	ZIP CODE	6521-A
11. PAG-IBIG ID NO.	NONE		
12. PHILHEALTH NO.	13-050150605-3		
13. SSS NO.	NONE	19. TELEPHONE NO.	NONE
14. TIN NO.	731-838-382	20. MOBILE NO.	09759748501
15. AGENCY EMPLOYEE NO.	NONE	21. E-MAIL ADDRESS (if any)	

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	ASILOM		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ANTONIA	NAME EXTENSION (JR., SR) III		
MIDDLE NAME	HILONGOS		LANCE NIÑO H. ASILOM	1/16/2021
OCCUPATION	NONE		ATHENA LOUISE H. ASILOM	5/8/2023
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	NONE			
24. FATHER'S SURNAME	ASILOM			
FIRST NAME	ANTONIO	NAME EXTENSION (JR., SR) SENIOR		
MIDDLE NAME	BORINAGA			
25. MOTHER'S MAIDEN NAME				
SURNAME	CONCOLES			
FIRST NAME	CORAZON			
MIDDLE NAME	VILLAR			

(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	BAYBAY SOUTH CENTRAL SCHOOL	PRIMARY EDUCATION	1994	2000	GRADUATED	2000	NONE
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	HIGH SCHOOL	2000	2004	GRADUATED	2004	NONE
VOCATIONAL / TRADE COURSE	DRIVING NCII	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	6/16/25
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IV. CIVIL SERVICE ELIGIBILITY						
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
	DRIVER'S LICENSE	PROF	5/24/2023	LTO BAYBAY	H12-18-003193	4/4/2033

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	6/14/25
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[illegible]

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)

[illegible]

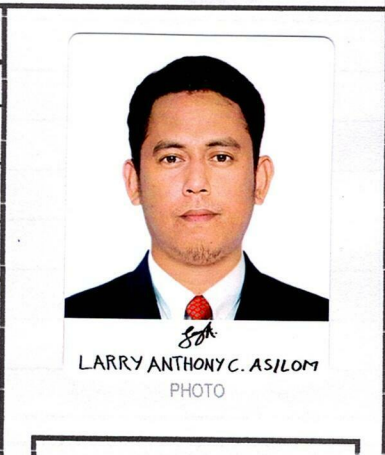
VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
DRIVING	N/A	N/A
MECHANIC		
WELDING		
MASON	EX MNL I S	
OPERATOR		

SIGNATURE	<i>[Signature]</i>	DATE	6/16/25
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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)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
MARIO LILIO P. VALENZONA	VSU, PPO, Baybay City	9176341514
MARLON G. BURLAS	VSU, PPO, Baybay City	9176341520
AMIEL R. ARMADA	VSU, PPO, Baybay City	9154094809
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.		



LARRY ANTHONY C. ASILOM
PHOTO

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	
Government Issued ID:	Driver's License
ID/License/Passport No.:	H12-18-003193
Date/Place of Issuance:	BAYBAY CITY

Signature (Sign inside the box)
Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this 27 JUN 2025, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. KAREN ABIGAIL S. MONTERON VSU Director, Legal Affairs and Services
Person Administering Oath

WORK EXPERIENCE SHEET

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

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 from most recent first.

- Duration: November 2024 - Present
- Position: Driver II
- Name of Office/Unit: University Health Service (UHS)
- Immediate Supervisor: Dr. Elwin Jay V. Yu
- Name of Agency/Organization and Location: Visayas State University, Visca, Baybay City, Leyte

- Duration: April 1, 2022 – October 2024
- Position: Admin. Aide I (Driver, Mechanic)
- Name of Office/Unit: Motor Pool Services Unit
- Immediate Supervisor: Marlon G. Burlas
- Name of Agency/Organization and Location: Visayas State University, Visca, Baybay City, Leyte


- Duration: January 10, 2014 – February 28, 2024
- Position: Driver, Backhoe Operator
- Name of Office/Unit: Three Kings Enterprices
- Immediate Supervisor: Rex Retana
- Name of Agency/Organization and Location: Three Kings Enterprices, Baybay City, Leyte

- Summary of Actual Duties

. Drive Light and Medium Vehicles

. Assist in repair and maintenance of Heavy and Light Equipment.

. Cleaning of Motor Pool surroundings and Garage


LARRY ANTHONY C. ASILOM
 (Signature over Printed Name
 of Employee/Applicant)

Date: June 16 / 2025