

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	CIRCULADO		
FIRST NAME	GEORGE	NAME EXTENSION (JR., SR) NONE	
MIDDLE NAME	SABADO		
3. DATE OF BIRTH (mm/dd/yyyy)	07/17/1973	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	PANGASUGAN BAYBAY, LEYTE	If holder of dual citizenship, please indicate the details.	Philippines
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)	152	House/Block/Lot No.	Street
8. WEIGHT (kg)	53	Subdivision/Village	PANGASUGAN
9. BLOOD TYPE		City/Municipality	BAYBAY
10. GSIS ID NO.	NONE	ZIP CODE	6521-A
11. PAG-IBIG ID NO.	1212 - 0955 - 8109	18. PERMANENT ADDRESS	
12. PHILHEALTH NO.	13 - 200558144 - 7	House/Block/Lot No.	Street
13. SSS NO.	NONE	Subdivision/Village	PANGASUGAN
14. TIN NO.	416 - 798 - 696 - 000	City/Municipality	BAYBAY
15. AGENCY EMPLOYEE NO.	N/A	ZIP CODE	6521-A
		19. TELEPHONE NO.	NONE
		20. MOBILE NO.	0935 126 8874, 0935 318 1302
		21. E-MAIL ADDRESS (if any)	gscirculado@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	CIRCULADO	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ROSALINA	NAME EXTENSION (JR., SR) NONE	VALERIE D. CIRCULADO
MIDDLE NAME	DABALOS		08/05/1994
OCCUPATION	SCIENCE RESEARCH ASSISTANT		ALMERA D. CIRCULADO
EMPLOYER/BUSINESS NAME	VISAYAS STATE UNIVERSITY		03/23/1997
BUSINESS ADDRESS	VISCA BAYBAY CITY LEYTE		TREXIE D. CIRCULADO
TELEPHONE NO.	NONE		08/14/2007
24. FATHER'S SURNAME	CIRCULADO		
FIRST NAME	ANTONIO	NAME EXTENSION (JR., SR) NONE	
MIDDLE NAME	SEMBORIO		
25. MOTHER'S MAIDEN NAME			
SURNAME	SABADO		
FIRST NAME	CRESENCIA		
MIDDLE NAME	EGIA		

(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	Sta. Cruz Elementary School	Primary Education	1981	1987	-	1987	NONE
SECONDARY							
VOCATIONAL / TRADE COURSE							
COLLEGE							
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

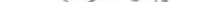
SIGNATURE		DATE	
-----------	--	------	--



[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	
-----------	---	------	--



## VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION

[illegible]

(Continue on separate sheet if necessary)

<b>VII. LEARNING AND DEVELOPMENT (L&amp;D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED</b>						
---	--	--	--	--	--	--


[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)
CARPENTRY	NONE	NONE
MASONRY		
CHAINSAW OPERATOR		
LAWN MOWER OPERATOR		
GARDENING/FARMING		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
-----------	---	------	--



<p>34. Are you related by consanguinity or affinity to appointing or recommending authority, chief of bureau or office or to the person who has immediate supervision over you in the 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><input type="checkbox"/> YES    <input checked="" type="checkbox"/> NO</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>If YES, give details: _____</p> <p><input type="checkbox"/> YES    <input checked="" type="checkbox"/> NO</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>If YES, give details: _____</p> <p><input type="checkbox"/> YES    <input checked="" type="checkbox"/> NO</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>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</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><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>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. DENNIS P. PEQUE</td><td>Dept. of Forestry, VSU</td><td>(053) 563 - 7552</td></tr><tr><td>DR. DARIO P. LINA</td><td>Dept. of Horticulture, VSU</td><td>(053) 563 - 7515</td></tr><tr><td>DEXTER S. MAGAN</td><td>Pangasugan Baybay, Leyte</td><td></td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	DR. DENNIS P. PEQUE	Dept. of Forestry, VSU	(053) 563 - 7552	DR. DARIO P. LINA	Dept. of Horticulture, VSU	(053) 563 - 7515	DEXTER S. MAGAN	Pangasugan Baybay, Leyte	
NAME	ADDRESS	TEL. NO.											
DR. DENNIS P. PEQUE	Dept. of Forestry, VSU	(053) 563 - 7552											
DR. DARIO P. LINA	Dept. of Horticulture, VSU	(053) 563 - 7515											
DEXTER S. MAGAN	Pangasugan Baybay, Leyte												
<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 colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td></tr><tr><td colspan="2">PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID:</td><td>TIN ID CARD</td></tr><tr><td>ID/License/Passport No.:</td><td>416 - 798 - 696 - 000</td></tr><tr><td>Date/Place of Issuance:</td><td>Jan. 09, 2012 / Ormoc City</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:	TIN ID CARD	ID/License/Passport No.:	416 - 798 - 696 - 000	Date/Place of Issuance:	Jan. 09, 2012 / Ormoc City	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="height: 50px; text-align: center; vertical-align: middle;">Signature (Sign inside the box)</td></tr><tr><td style="height: 30px; text-align: center; vertical-align: middle;">Date Accomplished</td></tr></table>	Signature (Sign inside the box)	Date Accomplished
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)													
PLEASE INDICATE ID Number and Date of Issuance													
Government Issued ID:	TIN ID CARD												
ID/License/Passport No.:	416 - 798 - 696 - 000												
Date/Place of Issuance:	Jan. 09, 2012 / Ormoc City												
Signature (Sign inside the box)													
Date Accomplished													
<p>SUBSCRIBED AND SWORN to before me this <u>AUG 01 2018</u>, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="display: flex; justify-content: center; align-items: center;"><div style="border: 1px solid black; padding: 5px; margin: 5px;"><p style="margin: 0;">RYSAN G. GUINOCOR</p><p style="margin: 0;">Person Administering Oath</p></div><div style="margin: 0 20px;"></div><div style="border: 1px solid black; padding: 5px; margin: 5px;"><p style="margin: 0;">PHOTO</p></div><div style="border: 1px solid black; padding: 5px; margin: 5px;"><p style="margin: 0;">Right Thumbprint</p></div></div>													