

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	VALDEVIESO		
FIRST NAME	GELBERTO	NAME EXTENSION (JR., SR)	
MIDDLE NAME	POLIQUIT		
3. DATE OF BIRTH (mm/dd/yyyy)	11/18/1974	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	Brgy. Gabas, Baybay City, Leyte	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Pls. indicate country:
6 CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	
7. HEIGHT (m)	5' 5"	ZIP CODE	House/Block/Lot No. Street
8. WEIGHT (kg)	76 kg		Brgy. Gabas
9. BLOOD TYPE	A+		Subdivision/Village Barangay
10. GSIS ID NO.	CAN02111116853		Baybay City Leyte
11. PAG-IBIG ID NO.	121100770393	City/Municipality Province	6521
12. PHILHEALTH NO.	19-052291237-6	18. PERMANENT ADDRESS	
13. SSS NO.	33-1801902-3	ZIP CODE	House/Block/Lot No. Street
14. TIN NO.	230-727-870-000		Brgy. Gabas
15. AGENCY EMPLOYEE NO.	V000719		Subdivision/Village Barangay
			Baybay City Leyte
		City/Municipality Province	6521
		19. TELEPHONE NO.	563-1286
		20. MOBILE NO.	09569539284
		21. E-MAIL ADDRESS (if any)	gelbertovaldevieso@yahoo.com

II. FAMILY BACKGROUND


22. SPOUSE'S SURNAME	MAZO		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	LEILANI	NAME EXTENSION (JR., SR)	ABIJA GIL M. VALDEVIESO	9/27/2000
MIDDLE NAME	ANTOLAN		ABIGAIL M. VALDEVIESO	8/6/2005
OCCUPATION	Administrative Aide I		JAEL M. VALDEVIESO	11/3/2006
EMPLOYER/BUSINESS NAME	Visayas State University		DOM ROBERT M. VALDEVIESO	8/20/2014
BUSINESS ADDRESS	Visca, Baybay City, Leyte			
TELEPHONE NO.				
24. FATHER'S SURNAME	VALDEVIESO			
FIRST NAME	ROBERTO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	TATOY			
25. MOTHER'S MAIDEN NAME				
SURNAME	POLIQUIT			
FIRST NAME	JEVINA			
MIDDLE NAME	MADERA			

(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	GABAS ELEM. SCHOOL	ELEMENTARY	1981	1987	Diploma	1987	none
SECONDARY	BAYBAY HIGH SCHOOL	HIGH SCHOOL	1987	1993	Diploma	1993	none
VOCATIONAL / TRADE COURSE	n/a						
COLLEGE	n/a						
GRADUATE STUDIES	n/a						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	April 25, 2017
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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	April 25, 2017
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIL GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION.

[illegible]

(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)

[illegible]

(Continue on separate sheet if necessary)

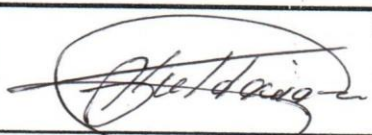
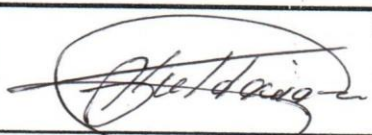
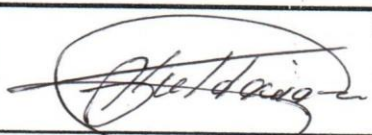
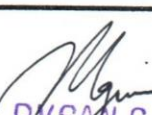
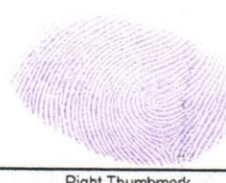
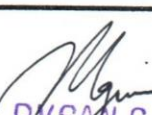
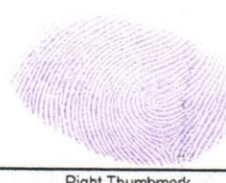
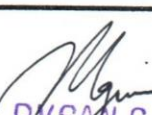
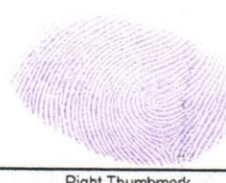
VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Driving		
Hair cutting		
Carpentry		
Welding		
Vehicle troubleshooting		

(Continue on separate sheet if necessary)

SIGNATURE	<i>[Signature]</i>	DATE	April 25, 2017
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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: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>Dr. Roberta D. Lauzon</td> <td>Visayas State University</td> <td>9172751950</td> </tr> <tr> <td>Mrs. Ivy C. Emance</td> <td>Baybay, Leyte</td> <td>9069267236</td> </tr> <tr> <td>Dr. Romel B. Armecin</td> <td>Visayas State University</td> <td>9173108074</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Dr. Roberta D. Lauzon	Visayas State University	9172751950	Mrs. Ivy C. Emance	Baybay, Leyte	9069267236	Dr. Romel B. Armecin	Visayas State University	9173108074
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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>													
<p>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</p> <p>PLEASE INDICATE ID Number and Date of Issuance</p> <p>Government Issued ID: Driver's License</p> <p>ID/License/Passport No.: N01-99-240997</p> <p>Date/Place of Issuance: 11/17/2014</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">  Signature (Sign inside the box) </td> </tr> <tr> <td style="text-align: center;"> APRIL 25, 2017 Date Accomplished </td> </tr> </table>	 Signature (Sign inside the box)	APRIL 25, 2017 Date Accomplished										
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<p>SUBSCRIBED AND SWORN to before me this <u>APR 26 2017</u>, 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;">  ATTY. RYSAN C. GUINOCOR NOTARY PUBLIC Person Administering Oath </td> <td style="text-align: center;">  Right Thumbmark </td> </tr> </table>		 ATTY. RYSAN C. GUINOCOR NOTARY PUBLIC Person Administering Oath	 Right Thumbmark										
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