

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 () ☐ 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		CORMANES							
FIRST NAME		JOAN MARIE						NAME EXTENSION (JR., SR)	
MIDDLE NAME		YGOT							
3. DATE OF BIRTH (mm/dd/yyyy)		04/01/1993		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		ORMOC 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 checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:		17. RESIDENTIAL ADDRESS		Maple Apartments House/Block/Lot No. Street Brgy. Guadalupe Subdivision/Village Barangay Baybay City Leyte City/Municipality Province			
7. HEIGHT (m)		4'11"		ZIP CODE		6521-A			
8. WEIGHT (kg)		60kg		18. PERMANENT ADDRESS		Melbourne Street House/Block/Lot No. Street Brgy. Dona Feliza Mejia Subdivision/Village Barangay Ormoc City Leyte City/Municipality Province			
9. BLOOD TYPE		B		ZIP CODE		6541			
10. GSIS ID NO		On Process		19. TELEPHONE NO.		563-1973			
11. PAG-IBIG ID NO.		917020099536		20. MOBILE NO.		09196736770			
12. PHILHEALTH NO.		13-025377160-8		21. E-MAIL ADDRESS (if any)		joanmarie.comanes@vsu.edu.ph			
13. SSS NO.		06-3939823-5							
14. TIN NO.		335-512-751-0000							
15. AGENCY EMPLOYEE NO.		V01031							

II. FAMILY BACKGROUND									
22. SPOUSE'S SURNAME		N/A		23. NAME of CHILDREN (Write full name and list all)		DATE OF BIRTH (mm/dd/yyyy)			
FIRST NAME		N/A		NAME EXTENSION (JR., SR)		N/A		N/A	
MIDDLE NAME		N/A							
OCCUPATION		N/A							
EMPLOYER/BUSINESS NAME		N/A							
BUSINESS ADDRESS		N/A							
TELEPHONE NO.		N/A							
24. FATHER'S SURNAME		CORMANES							
FIRST NAME		JUANITO		NAME EXTENSION (JR., SR) Jr.					
MIDDLE NAME		BARING							
25. MOTHER'S MAIDEN NAME		MA. ROSA DIANO YGOT							
SURNAME		YGOT							
FIRST NAME		MA. ROSA							
MIDDLE NAME		DIANO						(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		ORMOC SE SAN SCHOOL		ELEMENTARY DIPLOMA		06/01/2000 3/31/2005		N/A		2000		none	
SECONDARY		NEW ORMOC CITY NATIONAL HIGH SCHOOL		HIGH SCHOOL DIPLOMA		06/01/2005 3/31/2009		N/A		2005		none	
VOCATIONAL / TRADE COURSE		N/A											
COLLEGE		VISAYAS STATE UNIVERSITY		DOCTOR OF VETERINARY MEDICINE		06/01/2009 03/31/2016		N/A		2016		none	
GRADUATE STUDIES													

SIGNATURE		DATE		June 24, 2020	
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IV. CIVIL SERVICE ELIGIBILITY


[illegible]

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	June 24, 2020
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[illegible]

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)
Playing musical instruments (piano and guitar)	Delegate for Leyte on Viva Excon (Visayas Islands Visual Artists Exhibition and Conference) on Nov. 9-11, 2018 at Roxas City, Capiz, Philippines	Veterinary Practitioners Association of the Philippines
Painting (Acrylic and Watercolor)	Participant for the 2019 Sihag National Watercolor Competition hosted by Cebu Watercolor Society	Philippine Veterinary Medical Association
Cooking		Kasugbong Visual Arts Group

(Continue on separate sheet if necessary)

SIGNATURE

DATE _____

June 24, 2020

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)?

☐ YES☒ NO

☐ YES☒ 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?

☐ YES☒ NO

If YES, give details:

☐ YES☒ 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?

☐ YES☒ 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?

☒ YES☐ NO

If YES, give details:

Family Matters

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?

☐ YES☒ NO

If YES, give details:

☐ YES☒ NO

If YES, give details:

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES☒ 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?

☐ YES☒ NO

If YES, please specify:

☐ YES☒ NO

If YES, please specify ID No:


☐ YES☒ NO

If YES, please specify ID No:

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
Dr. Ana Marquiza Quilicot	Visca, Baybay, Leyte	9228713558
Dr. Agnes Taveros	Visca, Baybay, Leyte	9061919698
Dr. John Philip Lou Lumain	Visca, Baybay, Leyte	9355936394

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.



CORMANES, JOAN MARIE Y.
CORMANES, JOAN MARIE Y.

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: PRC ID

ID/License/Passport No.: 8842


Date/Place of Issuance: 09/1/2017PRC

See

Signature (Sign inside the box)

June 24, 2020

Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this 03 AUG 2020, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. RYSA C. GUINOCOR

LEGAL OFFICER

Person Administering Oath

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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, 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: August 2017 to present
- Position: Instructor I
- Name of Office/unit: Visayas State University, College of Veterinary Medicine
- Immediate Supervisor: Dr. Ana Marquiza Quilicot
- Name of Agency/Organization and Location: Visayas State University, Baybay City, Leyte
- List of Accomplishments and Contributions (if any)
 - Completion and submission of final grades of the students under the assigned subjects
 - Prepared research proposals, formed IEC materials, and participated in implemented extension services involved by the College of Veterinary Medicine
 - Has catered to various clients seeking consultation regarding their diseased companion animal, as well as sharing information regarding responsible pet ownership and rabies
- Summary of Actual Duties
 - The work includes teaching a number of students based on the assigned subjects, including the preparation of IEC materials to be used during the lectures, formation of examination sheets and laboratory activities, correcting papers during exams, computation of grades, etc.
 - Supervises advisees conducting their undergraduate thesis in the fields of epidemiology, parasitology, bacteriology, and mycology
 - Member in different committees within the College
 - Involved in the research projects and extension duties of the College of Veterinary Medicine, and submission of its annual reports.
 - Attending Veterinarian of the CVM Clinic, catering to clients seeking consultation, home services, and basic prophylactic procedures for companion animals

- Duration: November 15, 2016 – July 25, 2017
- Position: Veterinarian
- Name of Office/unit:
- Immediate Supervisor: Dr. Odysseus Camarillo
- Name of Agency/Organization and Location: Cebu Veterinary Doctors/F. Ramos St., Cebu City
- List of Accomplishments and Contributions (if any)
- Summary of Actual Duties

- Responsible for the diagnosis of diseases presented in the clinic, treatment of said diseases, and patient management in canines and felines; establishes client-owner relationships; cater to home-services which includes vaccinations and deworming; represent the organization to veterinary conferences (e.g. VPAP); educate owners regarding responsible pet ownership and common diseases that can harm their pets.


Joan Marie Cogmanes, DVM
(Signature over Printed Name
of Employee/Applicant)

Date: June 24, 2020