

## PERSONAL DATA SHEET

**WARNING:** Any misinterpretation 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	PRADERA		
FIRST NAME	CARL LEONARD	NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	MONREAL		
3. DATE OF BIRTH (mm/dd/yyyy)	2/16/1994	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	TAGBILARAN CITY, BOHOL	<input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Philippines	
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	UNIT 29, MAPLE APARTMENTS
7. HEIGHT (m)	5'9	House/Block/Lot No.	Street
8. WEIGHT (kg)	75	Subdivision/Village	GUADALUPE
9. BLOOD TYPE	O	City/Municipality	BAYBAY
10. GSIS ID NO.	2005109849	ZIP CODE	6521
11. PAG-IBIG ID NO.	121190459374	18. PERMANENT ADDRESS	House/Block/Lot No.
12. PHILHEALTH NO.	13-000122725-5	Subdivision/Village	UBOJAN
13. SSS NO.	N/A	City/Municipality	LOON
14. TIN NO.	001-394-498	ZIP CODE	6327
15. AGENCY EMPLOYEE NO.	V00936	19. TELEPHONE NO.	N/A
		20. MOBILE NO.	09755185354
		21. E-MAIL ADDRESS (if any)	carl.pradera@vsu.edu.ph

## 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	PRADERA			
FIRST NAME	LEONARDO	NAME EXTENSION (JR., SR)	JR.	
MIDDLE NAME	GUTIEREZ			
25. MOTHER'S MAIDEN NAME	CARMELITA CORITICO MONREAL			
SURNAME	MONREAL			
FIRST NAME	CARMELITA			
MIDDLE NAME	CORITICO			

## 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	CANIGAN-UBOJAN ELEM. SCHOOL	ELEMENTARY DIPLOMA	6/1/2000	4/1/2006	N/A	VALEDICTORIAN
	SECONDARY	SANDINGAN NATIONAL HIGH SCHOOL	HIGH SCHOOL DIPLOMA	6/1/2006	4/1/2010	N/A	VALEDICTORIAN
	VOCATIONAL / TRADE COURSE	N/A					
	COLLEGE	VISAYAS STATE UNIVERSITY	DOCTOR OF VETERINARY MEDICINE	6/1/2010	3/31/2106	N/A	
	GRADUATE STUDIES	N/A					
	GRADUATE STUDIES	N/A					

SIGNATURE		DATE	July 26, 2018
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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
VETERINARY MEDICINE LICENSURE EXAM	82.2	Aug. 23, 24, and 26	CAGAYAN DE ORO	8888	2/16/2019

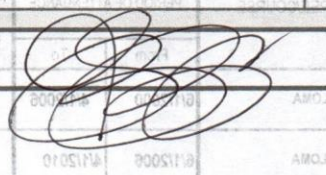
(Continue on separate sheet if necessary)

# V. WORK EXPERIENCE

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

28. INCLUSIVE DATES (mm/dd/yyyy)	POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/JOB PAY GRADE (If applicable) & STEP (Format "00-00" or INCREMENT)	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
9/6/2016	PRESENT	INSTRUCTOR 1	VISAYAS STATE UNIVERSITY		TEMPORARY	YES

(Continue on separate sheet if necessary)

SIGNATURE		DATE	
		July 26, 2018	



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

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	COLLEGE SUPREME STUDENT COUNCIL (CSSC)	6/1/2010	4/1/2011	1 YEAR	FIRST YEAR REPRESENTATIVE
	DOG OWNERS CLUB (DOC)	6/1/2014	4/1/2016	2 YEARS	MEMBER
	PHILIPPINE VETERINARY MEDICAL ASSOCIATION (PVMA)	9/1/2016	LIFETIME	LIFETIME	MEMBER
	YSU-FACULTY ASSOCIATION (YSU-FA)	9/1/2016	PRESENT	2 YEARS	MEMBER
	VENERABLE KNIGHTS AND LADY VETERINARIANS FRATERNITY AND SORORITY (VKLV)	6/1/2016	5/1/2017	1 YEAR	ADVISER
	PHILIPPINE ASSOCIATION OF LABORATORY ANIMAL SCIENCE (PALAS)	5/1/2018	5/1/2019	1 YEAR	MEMBER

(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/Vetc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	ANIMAL DISEASE DETECTION SEMINAR	2016	2016	1 DAY		COLLEGE OF VETMED - VISAYAS STATE U.
	PILMICO SEMINAR IN ANIMAL PRODUCTION AND MANAGEMENT	2016	2016	1 DAY		PILMICO
	ORIENTATION SEMINAR FOR NEWLY HIRED FACULTY	2016	2016	1 DAY		VISAYAS STATE UNIVERSITY
	EFFECTIVE TEACHING STRATEGY SEMINAR	2016	2016	1 DAY		VISAYAS STATE UNIVERSITY
	RESCUE IN STRANDED MARINE ANIMALS	2016	2016	1 DAY		VETERINARY PRACTITIONERS ASSOCIATION OF THE PHILIPPINES
	ANNUAL SCIENTIFIC CONFERENCE	6/22/2017	6/23/2017	2 DAYS		LARGE ANIMAL MARINE VERTEBRATES
	ORIENTATION AND WORKSHOP OF ANIMAL WELFARE ENFORCEMENT OFFICERS	10/26/2017	10/27/2017	2 DAYS		DEPARTMENT OF AGRICULTURE-BUREAU OF ANIMAL INDUSTRY
	FIRST SCIENTIFIC CONFERENCE	5/22/2018	5/22/2018	1 DAY		PHILIPPINE COLLEGE OF LABORATORY ANIMAL MEDICINE
	30TH ANNUAL SCIENTIFIC CONFERENCE AND WORKSHOP	5/23/2018	5/25/2018	3 DAYS		PHILIPPINE ASSOCIATION OF LABORATORY ANIMAL SCIENCE

REFERENCES (Person not related by consanguinity or affinity to applicant/employee)

NAME	ADDRESS	TEL NO.	ID picture taken within the last 6 months (3.5 cm X 4.5 cm) (passport size)	With full and handwritten name and signature over the photograph
DR. EUGENE B. LANADA	Visca, Baybay, Leyte	9176341475		
DR. LOTIS M. BALALA	Visca, Baybay, Leyte	9435083300		
DR. AGNES M. TAVEROS	Visca, Baybay, Leyte	9061918888		

(Continue on separate sheet if necessary)

# VIII. OTHER INFORMATION

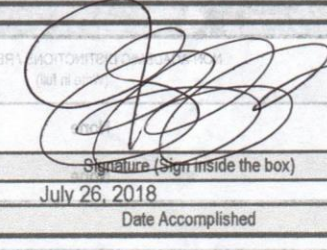

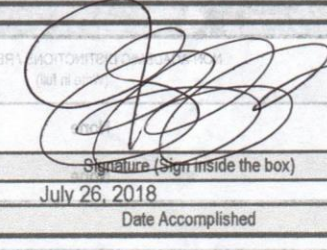

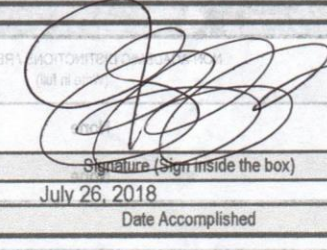

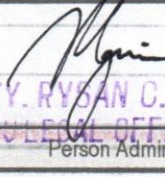
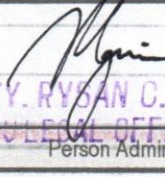
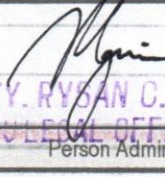
31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	COMPUTER LITERATE		None		PHILIPPINE VETERINARY MEDICAL ASSOCIATION
	GOOD COMMUNICATION SKILLS		None		PHILIPPINE ASSOCIATION OF LABORATORY ANIMAL SCIENCE
	COOKING				

(Continue on separate sheet if necessary)

SIGNATURE	DATE
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July 26, 2017



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?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO												
b. within the fourth degree (for Local Government Unit - Career Employees)?		<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?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO												
If YES, give details:														
b. Have you been criminally charged before any court?		<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)?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO												
If YES, give details:														
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:														
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?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO												
If YES, please specify:														
b. Are you a person with disability?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO												
If YES, please specify ID No:														
c. Are you a solo parent?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO												
If YES, please specify ID No:		None yet												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)														
<table border="1"><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>DR. EUGENE B. LAÑADA</td><td>Visca, Baybay, Leyte</td><td>9176341472</td></tr><tr><td>DR. LOTIS M. BALALA</td><td>Visca, Baybay, Leyte</td><td>9435083300</td></tr><tr><td>DR. AGNES M. TAVEROS</td><td>Visca, Baybay, Leyte</td><td>9061919698</td></tr></tbody></table>			NAME	ADDRESS	TEL. NO.	DR. EUGENE B. LAÑADA	Visca, Baybay, Leyte	9176341472	DR. LOTIS M. BALALA	Visca, Baybay, Leyte	9435083300	DR. AGNES M. TAVEROS	Visca, Baybay, Leyte	9061919698
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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.														
<table border="1"><tr><td>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td><td rowspan="4"> Signature (Sign inside the box) July 26, 2018 Date Accomplished</td><td rowspan="4"> Right Thumbmark</td></tr><tr><td>Government Issued ID: PRC ID</td></tr><tr><td>ID/License/Passport No.: 8888</td></tr><tr><td>Date/Place of Issuance: 09/2/2016PRC</td></tr></table>			Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	 Signature (Sign inside the box) July 26, 2018 Date Accomplished	 Right Thumbmark	Government Issued ID: PRC ID	ID/License/Passport No.: 8888	Date/Place of Issuance: 09/2/2016PRC						
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SUBSCRIBED AND SWORN to before me this <u>AUG 01 2018</u> , affiant exhibiting his/her validly issued government ID as indicated above.														
<table border="1"><tr><td> ATTY. RYAN C. GUINOGOR VSO LEGAL OFFICER Person Administering Oath</td></tr></table>			 ATTY. RYAN C. GUINOGOR VSO LEGAL OFFICER Person Administering Oath											
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CARL LEONARD M. PRADERA

Right Thumbmark

SIGNATURE