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 () | I 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) ALMERODA 2. SURNAME NAME EXTENSION (JR. SR) FIRST NAME **FEDILITO** MIDDLE NAME MANATAD 3 DATE OF BIRTH 16. CITIZENSHIP 2/15/1969 ✓ Filipino ☐ Dual Citizenship (mm/dd/yyyy) ☐ by birth ☐ by naturalization 4. PLACE OF BIRTH GABALDON, NUEVA ECIJA Pls. indicate country: If holder of dual citizenship, please indicate the details. ☐ Female 5 SEX ▼ Male ☐ Single ✓ Married 17. RESIDENTIAL ADDRESS N/A N/A 6 CIVIL STATUS House/Block/Lot No ☐ Widowed ☐ Separated Street BRGY. GUADALUPE N/A Other/s: Subdivision/Village Barangay BAYBAY CITY LEYTE 1.60 7. HEIGHT (m) City/Municipality Province 60 8. WEIGHT (kg) ZIP CODE 6521 18. PERMANENT ADDRESS N/A N/A 9. BLOOD TYPE A+ House/Block/Lot No N/A BRGY. GUADALUPE N/A 10 GSIS ID NO Subdivision/Village Barangay BAYBAY CITY LEYTE 11. PAG-IBIG ID NO. 121205292924 City/Municipality Province 12. PHILHEALTH NO. 13-000103000-1 ZIP CODE 6521 N/A 13. SSS NO. 19. TELEPHONE NO. N/A 14. TIN NO. 930-232-634 0926818052/09380356190 20. MOBILE NO. 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) fedilitoalmeroda@gmail.com FAMILY BACKGROUND 22. SPOUSE'S SURNAME BULAWAN 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) 3/11/1998 MARIFE MARTIM B. ALMERODA FIRST NAME MADELO MIDDLE NAME N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME **BUSINESS ADDRESS** N/A N/A TELEPHONE NO. ALMERODA 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME MODESTO DIAZ MIDDLE NAME 25. MOTHER'S MAIDEN NAME MANATAD SURNAME **GENEROSA** FIRST NAME **BETARMOS** MIDDLE NAME (Continue on separate sheet if necessary) SCHOLARSHIP HIGHEST LEVEL/ BASIC EDUCATION/DEGREE/COURSE PERIOD OF ATTENDANCE YEAR ACADEMIC NAME OF SCHOOL LEVEL UNITS EARNED GRADUATED HONORS (Write in full) (Write in full) (if not graduated) To RECEIVED From **GABAS ELEMENTARY SCHOOL** YEAR 1983 GRADUATED 1983 N/A PRIMARY **YEAR 1977 ELEMENTARY** GRADUATED 1987 N/A SECONDARY EXPIREMENTAL RURAL HIGH SCHOOL VISCA SECONDARY **YEAR 1983 YEAR 1987** VOCATIONAL / 9/3/2019 10/9/2019 GRADUATED 2019 **TEASDA** ORGANIC AGRICULTURE PRODUCTION NCII VOCATIONAL TRADE COURSE COLLEGE VISAYAS STATE COLLEGE OF AGRICULTURE **BACHELOR OF SCIENCE IN FORESTRY YEAR 1987 YEAR 1992** 3RD YEAR N/A **GRADUATE STUDIES** Decbember 1, 2024 DATE SIGNATURE

IV. CIVĮL SE	RVICE ELIGIBI	LITY .								
27. CAREBR SERVICE/RA 1989 (BOARD/BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable)			RATING	DATE OF	DI ACE OF EVAMINA	DI ACE OF EYAMINATION / CONFEDENT			LICENSE (if applicable)	
			(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity	
N/A			N/A	N/A	N/A			N/A	N/A	
-										
•			(Co	ntinue on separate sheet it	necessary)					
	XPERIENCE	Start from your recent	work) Description	of duties should be	indicated in the attached	l Work Expe	rience sheet.			
28. INCLU	ISIVE DATES						SALARY/ JOB/ PAY GRADE (if	074710 05	GOV'T	
From	m/dd/yyyy) To	POSITION TI (Write in full/Do not		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	applicable)& STEP (Format *00-0*)/ INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/ N)	
8/1/2024	PRESENT	ADMINISTRATIV	/E AIDE I	INSTITUTE OF TRE	13,530.00	Grade I	CASUAL	Υ		
1/1/2021	7/31/2024	SCIENCE RESEA	ACH AIDE	INSTITUTE OF TRE	14700.00	N/A	JOB ORDER	Υ		
1/1/1999	12/31/2020	SCIENCE RESEA	ACH AIDE	INSTITUTE OF TRE	7200.00	N/A	JOB ORDER	Y		
1/1/2001	7/31/2016	LABORE	R	INSTITUTE OF TRE	5000.00	N/A	JOB ORDER	Y		
1/1/1998	12/31/2000	LABORE	R	GERMAN SOCIETY FOR INTERNATIONAL COOPERATION		4000.00	N/A	JOB ORDER	Y	
			(Co	ontinue on separate sheet	f necessary)					
SIGN	ATURE	A	+		DATE		December	r, 2024		

VI. VOLUNTARY WORK OR INVOLVEMENT II	N CIVIC / NON-GOVERNMENT /	PEOPLE / VC	LUNTARY O	RGANIZATION	I/S		
NAME & ADDRESS OF ORGANIZATION (Write in full) N/A			INCLUSIVE DATES (mm/dd/yyyy) From To		POSITION / NATURE OF WORK		
			N/A	N/A		N/A	
		tinue on separate :)			
VII. LEARNING AND DEVELOPMENT (L&D) I Start from the most recent L&D/training program and include				f/Executive/Manage	erial 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/	CONDUCTED/ SPONSORED BY (Write in full)	
		From	То		Technical/etc)		
INTERGRATING RAINFORESTATION FARMING TO PROMOTE SUSTAINABLE AGARWOOD PRODUCTION IN VISAYAS			8/19/2023	24.0	FACILITATOR	ALLIANCE OF UNITED OFW AND VETERANS AGRICULTURE; AND YOUTH WITH A MISSION CEBU	
CROSS SITE VISIT OF STUDENTS UNDER THE 2023	S SCIENCE IMMERSION PROGRAM	7/8/2023	7/8/2023	8.0	RESOURCE PERSON	DEPT. OF SCIENCE AND TECHNOLOGY PHILIPPINE SCIENCE HIGH SCHOOL CENTRAL VISAYAS CAMPUS	
RAINFORESTATION TRAINING FOR CLIMA	TE-RESILIENT RECOVERY	11/20/2019	11/22/2019	24.0	LECTURER	ENVIRONMENTAL LEADERSHIP AND TRAINING INITIATIV	
RESTORATION BOOT CAMP FOR TROP		6/47/2019	6/22/2019	48.0	LECTURER	ENVIRONMENTAL LEADERSHIP AND TRAINING INITIATIV	
TRAINING COURSE ON NURSERY ESTABLISHMENT A PRODUCTION	ND COMMUNITY-BASED SEEDLING	5/16/2019	5/18/2019	24.0	RESOURCE SPEAKER		
INTERNATIONAL TRAINING OF TRAINERS	S ON REINFORESTATION	4/22/2019	4/26/2019	40.0	RESOURCE PERSON	ENVIRONMENTAL LEADERSHIP AND TRAINING INITIATIVE	
CLIMATE CHANGE AND COMMUNITY-BASED ECOSYSTEM	M AND DISASTER RISK MANAGEMENT	2/21/2019	2/23/2019	24.0	FIELD RESOURCE PERSON	ITEEM-VSU	
TRAINING-WORKSHOP ON BAMBOO NURSERY ESTABLISH	IMENT AND PLANTATION MANAGEMENT	6/19/2017	6/21/2017	24.0	PARTICIPANT	SOUTHEAST ASIAN REGIONAL CENTER FOR GRADUATE STUDY AND RESEARCH IN AGRICULTURE	
RAINFORESTATION TR	AINING	12/16/2016	12/18/2016	24.0	TRAINER	PENAGMANNAKI	
INTERNATIONAL TRAINERS' TRAINING	ON REINFORESTATION	11/4/2015	11/8/2015	40.0	FACILITATOR	ENVIRONMENTAL LEADERSHIP AND TRAINING INITIATIVE	
INTERNATIONAL TRAINERS' TRAINING	ON REINFORESTATION	5/18/2015	5/22/2015	40.0	FIELD FACILITATOR	ENVIRONMENTAL LEADERSHIP AND TRAINING INITIATIVE	
RAINFORESTATION ORIENTATION	AND CROSS-VISITS	3/3/2015	3/4/2015	16.0	FIELD FACILITATOR	NATIONAL LAND AFFORESTATION PROMOTION ORGANIZATIO	
TRAINING ON REFORES	TATION	8/8/2012	8/11/2012	32.0	FIELD FACILITATOR	FOUNDATION FOR THE PHIL. ENVIRONMENT	
TRAINING ON REFORES	TATION	5/7/2012	5/9/2012	24.0	FIELD FACILITATOR	ENERGY DEVELOPMENT CORPORATION	
TRAINING ON REFORESTATION			5/16/2012	24.0	FIELD FACILITATOR	ENERGY DEVELOPMENT CORPORATION	
TRAINING ON REFORESTATION FOR PROTECTED AREA SUPERINTENDENTS			2/5/2011	40.0	FACILITATOR	ENVIRONMENTAL LEADERSHIP AND TRAINING INITIATIVE	
INTERNATIONAL TRAINERS' TRAINING ON REINFORESTATION			12/6/2009	48.0	FACILITATOR	ENVIRONMENTAL LEADERSHIP AND TRAINING INITIATIVE	
RAINFORESTATION TRAINERS' TRAINING			5/22/2009	40.0	FACILITATOR	ENVIRONMENTAL LEADERSHIP AND TRAINING INITIATIVE	
RAINFORESTATION TRAINER	RS' TRAINING	4/22/2009	4/27/2009	40.0	FACILITATOR	ENVIRONMENTAL LEADERSHIP AND TRAINING INITIATIVE	
	(Con	ntinue on separate	sheet if necessary	0			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
NURSERY ESTABLISHMENT	N/A					N/A	
PLANT PROPAGATION		N/A					
BASIC PLANT TAXONOMY N/A						N/A	
RAINFORESTATION FARM ESTABLISHMENT	N/A				N/A		
ORGANIC AGRICULTURE FARMING	NATIONAL CERTIFICATE II				N/A		
	(Cor	ntinue on separate	sheet if necessary		ATF	l	
SIGNATURE				, D	ATE	December 1, 2024	

CS FORM 212 (Revised 2017), Page 3 of 4

34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Care	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:			
35.	a. Have you ever been found guilty of any administrative offe	☐ YES ☑ NO If YES, give details:			
	b. Have you been criminally charged before any court?	☐ YES ☑ NO If YES, give details: Date Filed: Status of Case/s:			
36.	Have you ever been convicted of any crime or violation of ar any court or tribunal?	☐ YES ☐ NO If YES, give details:			
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, en (abolition) in the public or private sector?	☐ YES ☑ NO If YES, give details:			
38.	a. Have you ever been a candidate in a national or local electron Barangay election)? b. Have you resigned from the government service during the service d	☐ YES ☑ NO If YES, give details: ☐ YES ☑ NO			
39.	election to promote/actively campaign for a national or local Have you acquired the status of an immigrant or permanent	If YES, give details: ☐ YES ☑ NO If YES, give details (country):			
40. a. b. c.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES. Dlease specify ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	/appointee)			
	NAME	ADDRESS	TEL. NO.		
	DR. MARLITO M. BANDE	VISCA,BAYBAY CITY,LEYTE	(053) 563 7497		
	ENGR. JIMMY O. POGOSA	VISCA,BAYBAY CITY,LEYTE	(053) 563 7497		
	MS. KLEER JEANN G. LONGATANG	VISCA,BAYBAY CITY,LEYTE	(053) 563 7497		
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this docu administrative/criminal case/s against me.	ent laws, rules and regulations of the I ntative to verify/validate the contents state	Republic of the ed herein.	FEDILITO M ALMERODA PHOTO	
G	Sovernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Sovernment Issued ID: PHILHEALTH D/License/Passport No.: 13-000103000-1 ate/Place of Issuance: 1999/VISCA,BAYBAY CITY,LEYTE	Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this	DEC 2024 , affiant exhibit	ing his/her validly issued	d government ID as indicated above.	
		Person Administering Oath	h		

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: August 1,2024 present
- · Position: Administrative Aide I
- Name of Office/Unit: ITEEM
- Immediate Supervisor: TEOFANES A. PATINDOL
- Name of Agency/Organization and Location: Visayas State University, Baybay City, Leyte.
 - List of Accomplishments and Contributions (if any)
 - o checked all the building and maintenance of the surroundings
 - cleaned the study sites and Agro-Ecosystem Area
 - Maintained the ITEEM-TED area secured
 - Established 20m by 20m quadrat along the established long term plots
 - o Identified trees Scientific names and sample collection for Herbarium
 - o Processed samples for Herbarium.
 - Summary of Actual Duties
 - Propagate quality planting materials (i.e., sexual or asexual) for native tree species to support the research and extension projects of the institute
 - o Assist in the floristic and biodiversity assessment in critical watershed areas;
 - o Collect and prepare herbarium specimens;
 - Conduct regular monitoring and assessment on the phenological (i.e., flowering and fruiting) assessment and taxonomic identification of native species (especially the threatened dipterocarp species) in the natural habitat;
 - Assist, and conduct training on forest landscape restoration using native and endemic species, specifically on nursery establishment, seedling production, and maintenance;
 - Assist in the conduct of study on the sexual and asexual propagation (i.e., top cuttings and marcoting) of native tree species;
 - Assist in the biophysical assessment prior to the establishment of the rainforestation adopters farm; and
 - Monitor and assess the rainforestation demonstration farms established by the institute.

Attachment to CS Form No. 212

FEDILITO M. ALMERODA

(Signature over Printed Name of Employee/Applicant)

Date: 12 5 24