

## 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	CINCO			
FIRST NAME	MARK ANTHONY		NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	TABUNAN			
3. DATE OF BIRTH (mm/dd/yyyy)	12/08/1997	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:	
4. PLACE OF BIRTH	HINUNANGAN, SO. LEYTE	If holder of dual citizenship, please indicate the details.		
5. SEX	<input checked="" type="checkbox"/> Male <input 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	N/A House/Block/Lot No. Street N/A STO. NINO 1 Subdivision/Village Barangay HINUNANGAN SOUTHERN LEYTE City/Municipality Province 6608	
7. HEIGHT (m)	1.65	ZIP CODE	6608	
8. WEIGHT (kg)	79	18. PERMANENT ADDRESS	N/A House/Block/Lot No. Street N/A STO. NINO 1 Subdivision/Village Barangay HINUNANGAN SOUTHERN LEYTE City/Municipality Province 6608	
9. BLOOD TYPE	B+	ZIP CODE	6608	
10. GSIS ID NO.	NONE	19. TELEPHONE NO.	NONE	
11. PAG-IBIG ID NO.	1212-5753-0097	20. MOBILE NO.	09070574197	
12. PHILHEALTH NO.	1325-1630-8188	21. E-MAIL ADDRESS (if any)	mark.cinco@vsu.edu.ph	
13. SSS NO.	34-8707651			
14. TIN NO.	610-137-044-00000			
15. AGENCY EMPLOYEE NO.	V02042			

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	NONE		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	NONE	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	CINCO			
FIRST NAME	ANTONIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	CAMAHALAN	N/A		
25. MOTHER'S MAIDEN NAME				
SURNAME	TABUNAN			
FIRST NAME	ARLYN			
MIDDLE NAME	USARES			

(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	OTAMA ELEMETARY SCHOOL	BASIC EDUCATION	06/01/2004	06/01/2010	N/A	2010	6TH HONORABLE
SECONDARY	HOLY ROSARY ACADEMY OF HINUNANGAN INC.	SECONDARY EDUCATION	06/15/2010	06/30/2014	N/A	2014	5TH HONORABLE/ EEC SCHOLAR
VOCATIONAL / TRADE COURSE	NONE	NONE	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BS AGRICULTURE MAJOR IN PLANT BREEDING	08/01/2016	07/14/2019	N/A	2019	DA-BIOTECH SCHOLAR
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MS AGRONOMY MINOR IN PLANT BREEDING	10/2020	Present	12	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE

DATE

December 4, 2024



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
	Licensure for Agriculture	82.8	Nov. 21-24, 2022	Tacloban City, Leyte	0042007	12/08/2026

## V. WORK EXPERIENCE

[illegible]

## VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATIONS

29	NAME ADDRESS OF ORGANIZATION (a)	(b) (c)	INCLUSIVE DATES (d) (e) (f)		NUMBER OF HOURS	POSITION / NATURE OF WORK
			From	To		
	HINGYAP PH		02/06/2021	03/07/2021	16 HOURS	Volunteer in the campaign of DOH for the vaccination of paño and sigáta at Palé, Leyte
	KABALKAT CNYCOM		07/22/2021	PRESENT	N/A	Communicator

VII. LEARNING AND DEVELOPMENT (LSD) INTERVENTIONS/ TRAINING PROGRAMS ATTENDED	
1. Name of the Program	
2. Description of the Program	
3. Date of Completion	
4. Duration of the Program	
5. Location of the Program	
6. Name of the Program Manager	
7. Name of the Program Sponsor	
8. Name of the Program Facilitator	
9. Name of the Program Participant	
10. Name of the Program Coordinator	
11. Name of the Program Director	
12. Name of the Program Manager	
13. Name of the Program Sponsor	
14. Name of the Program Facilitator	
15. Name of the Program Participant	
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20. Name of the Program Facilitator	
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145. Name of the Program Sponsor	
146. Name of the Program Facilitator	
147. Name of the Program Participant	
148. Name of the Program Coordinator	
149. Name of the Program Director	
150. Name of the Program Manager	
151. Name of the Program Sponsor	
152. Name of the Program Facilitator	

(Start from the most recent LAD training program and include only the relevant LAD training taken for the last five (5) years for Division Chief/ recipient/ supervisor/ personnel.)[illegible]

### VIII. OTHER INFORMATION

21. SPECIAL SKILLS and HOBBIES		22. NON-ACADEMIC DISTINCTIONS / RECOGNITION <small>(Write in full)</small>	23. MEMBERSHIP IN ASSOCIATION/ORGANIZATION <small>(Write in full)</small>
MOUNTAINEERING		2022 YOUNG FARMER'S CHALLENGE PROVINCIAL LEVEL AWARDEE	KNIGHTS OF THE COLOMBUS
VOLLEYBALL			KABALKAT CIVICOM
DRIVER LICENCE R1			
SIGNATURE		DATE	December 4, 2024



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)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <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?  b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____  <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)?  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: _____  <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? b. Are you a person with disability? c. Are you a solo parent?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)		
NAME	ADDRESS	TEL. NO.
Julien R. Derooy	VSU, Baybay City, Leyte	09420061818
LISA I. ARCE	VSU, Baybay City, Leyte	09273967451
Luz O. Moreno	VSU, Baybay City, Leyte	09162439381

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.



**CINCO, MARK ANTHONY T.**

Government issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)	
PLEASE INDICATE ID Number and Date of Issuance	
Government issued ID: <b>Driver's License</b>	
ID/License/Passport No.: <b>H12-19-001151</b>	
Date/Place of Issuance: <b>11/06/2023</b>	

Signature (Sign inside the box)	Right Thumbmark
Date Accomplished	

SUBSCRIBED AND SWORN to before me this 08 JAN 2025, affiant exhibiting his/her validly issued government ID as indicated above.

 <b>ATTY. RYSAW C. GUINOCOR</b> VSU Chief Legal Officer
Person Administering Oath



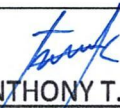
## WORK EXPERIENCE SHEET

**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.

Sample: If applying to Supervising Administrative Officer

- Duration: August 1, 2022 – Present
- Position: Science Research Assistant
- Name of Office/Unit: National Abaca Research Center
- Immediate Supervisor: Luz O. Moreno
- Name of Agency/Organization and Location: Visayas State University
  
- List of Accomplishments and Contributions (if any)
  
- Summary of Actual Duties
  - Performs abaca breeding activities e. g. selection of parental materials, monitoring of flowering, hybridization, seed collection, seed germination, and care & maintenance of hybrid seedlings in seed boxes
  - Performs evaluation activities in single plant and two-row non-replicated trials.
  - Performs field operations and supervision of laborers in land preparation, preparation of planting materials and lay-outing, etc
  - Gathers research data, encodes to computer and analyzes data.
  - Makes study report (Midyear, annual and In-house reports).
  - Others: serves as resource person on techniques in artificial hybridization of abaca.

  
 MARK ANTHONY T. CINCO  
 (Signature over Printed Name  
 of Employee/Applicant)  
 Date: 01/06/25