

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	IGOT		
FIRST NAME	LEODEL	NAME EXTENSION (JR., SR)	
MIDDLE NAME	SORIA		
3. DATE OF BIRTH (mm/dd/yyyy)	8/15/1981	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	Baybay, 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 type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street Subdivision/Village Brgy. Marcos Baybay Leyte City/Municipality Province
7. HEIGHT (m)	1.524 m	ZIP CODE	6521
8. WEIGHT (kg)	60 kg	18. PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village Brgy. Marcos Baybay Leyte City/Municipality Province
9. BLOOD TYPE	O	ZIP CODE	6521
10. GSIS ID NO.		19. TELEPHONE NO.	
11. PAG-IBIG ID NO.		20. MOBILE NO.	09950814852
12. PHILHEALTH NO.	13-000103267-5	21. E-MAIL ADDRESS (if any)	leodeligot476@gmail.com
13. SSS NO.	NA		
14. TIN NO.	933-242-063		
15. AGENCY EMPLOYEE NO.	V0151		

II. FAMILY BACKGROUND


22. SPOUSE'S SURNAME	IGOT		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	MARIA CHRISTY	NAME EXTENSION (JR., SR)	RON JAMES B. IGOT	6/18/2005
MIDDLE NAME	BAGARINAO		KEVIN JOSH B. IGOT	2/3/2012
OCCUPATION	OFW			
EMPLOYER/BUSINESS NAME	NA			
BUSINESS ADDRESS	HONGKONG			
TELEPHONE NO.	NA			
24. FATHER'S SURNAME	IGOT			
FIRST NAME	LEOPOLDO	JR		
MIDDLE NAME	POSAS			
25. MOTHER'S MAIDEN NAME	BORELA			
SURNAME	IGOT			
FIRST NAME	DELIA			
MIDDLE NAME	BORELA			

(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	SAN AGUSTIN ELEMENTARY SCHOOL, BAYBAY CITY	NA	6/1/1988	3/1/1994	NA	1994	NA
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL, BAYBAY CITY	NA	6/1/1994	3/1/1998	NA	1998	NA
VOCATIONAL / TRADE COURSE	NA	NA	NA	NA	NA	NA	NA
COLLEGE							
GRADUATE STUDIES							

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01-11-24
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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	<i>L. J. H.</i>	DATE	01-11-24
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29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	NA	NA	NA	NA	NA
					P





[illegible]

VIII. OTHER INFORMATION

[illegible]

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	1-11-2023

1-11-2023

<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: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>JAN ANA B. MASENDO</td> <td>GUADALUPE, BAYBAY</td> <td>9171080150</td> </tr> <tr> <td>MERRY CHRIST'L S. GUINOCOR</td> <td>VSU, VISCA, BAYBAY</td> <td>9566530545</td> </tr> <tr> <td>DR. ELWIN JAY V. YU</td> <td>VSU, VISCA, BAYBAY</td> <td>9357882192</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	JAN ANA B. MASENDO	GUADALUPE, BAYBAY	9171080150	MERRY CHRIST'L S. GUINOCOR	VSU, VISCA, BAYBAY	9566530545	DR. ELWIN JAY V. YU	VSU, VISCA, BAYBAY	9357882192
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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>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Government issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td>PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government issued ID: H03-07002376</td> </tr> <tr> <td>ID/License/Passport No.: Drivers License</td> </tr> <tr> <td>Date/Place of Issuance: Baybay City</td> </tr> </table>	Government issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)	PLEASE INDICATE ID Number and Date of Issuance	Government issued ID: H03-07002376	ID/License/Passport No.: Drivers License	Date/Place of Issuance: Baybay City	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">  Signature (Sign inside the box) 1-11-2023 Date Accomplished </td> </tr> </table>	 Signature (Sign inside the box) 1-11-2023 Date Accomplished						
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<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>SUBSCRIBED AND SWORN to before me this 19 JAN 2024,</p> <div style="border: 1px solid black; padding: 5px; text-align: center;">  ATTY. RYSAN C. GUINOCOR VSU Chief Legal Officer Person Administering Oath </div> </div> <div style="width: 50%;"> <p>affiant exhibiting his/her validly issued government ID as indicated above.</p> </div> </div>													

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:

- Duration: March 1, 2023-present
- Position: Utility/laborer
- Name of Office/Unit: National Coconut Research Center-Visayas
- Immediate Supervisor: Dr. Marisel Leorna
- Name of Agency/Organization and Location:

- List of Accomplishments and Contributions (if any)

○

- Duration: March 1, 2023 to present
- Position: Admin. Aide I
- Name of Office/Unit: Engineering Section, National Coconut Research Visayas, VSU
- Immediate Supervisor: Mencius B. Iesidan
- Name of Agency/Organization and Location:
 - **NCRC-V, VSU, Baybay City, Leyte**

- Summary of Actual Duties
- **Operates chainsaw in cutting trees for lumber**
- **Fabricate machine**
- **Operates grasscutter in maintaining the assigned area.**
- **Does what supervisor has assigned.**


LEODEL S. IGOT

(Signature over Printed Name
of Employee/Applicant)

Date: 02-07-24