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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

Revised 2017 PERSONAL DATA SHEET READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. 1. CSID No. Print legibly. Tick appropriate boxes ( ) a use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use only) PERSONAL INFORMATION 2 SURNAME ALKUINO NAME EXTENSION (JR., SR) FIRST NAME NOEL MIDDLE NAME MASCARIÑAS 3. DATE OF BIRTH 1/12/1961 16. CITIZENSHIP ☑ Filipino (mm/dd/yyyy) Dual Citizenship ☑ by birth ☐ by naturalization 4. PLACE OF BIRTH Brgy. Sta Cruz, Baybay City, Leyte If holder of dual citizenship, Pls. indicate country: please indicate the details. ☐ Female 5 SEX ₩ Single ☑ Married 17 RESIDENTIAL ADDRESS 6 CIVIL STATUS ☐ Widowed ☐ Separated House/Block/Lot No Street Sta Cruz Other/s: Subdivision/Village Barangay Baybay 162 m Leyte 7. HEIGHT (m) City/Municipality Province 8. WEIGHT (kg) 65 kg ZIP CODE 6521 18. PERMANENT ADDRESS 9. BLOOD TYPE В House/Block/Lot No. Street 10. GSIS ID NO. Sta Cruz 610011202399 Subdivision/Village Barangay Baybay Leyte 11. PAG-IBIG ID NO. 1700-0029-5022 City/Municipality Province 12. PHILHEALTH NO. 13-000069894 ZIP CODE 6521 NA 13. SSS NO. 19. TELEPHONE NO. NA 14 TIN NO 928-633-568 20. MOBILE NO. 09362158615 15. AGENCY EMPLOYEE NO. V000560 21. E-MAIL ADDRESS (if any) noel.alkuino@vsu.edu.ph FAMILY BACKGROUND 22. SPOUSE'S SURNAME LAPASANDA 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR. SR LIZA VAL LAPASANDA ALKUINO FIRST NAME 2/14/2001 VARRON FAYE LAPASANDA ALKUINO MIDDLE NAME 10/12/2008 OCCUPATION NA EMPLOYER/BUSINESS NAME NA BUSINESS ADDRESS NA TELEPHONE NO. 9065579489 24. FATHER'S SURNAME ALKUINO NAME EXTENSION (JR., SR) SR FIRST NAME JOSE MIDDLE NAME BARTOLINI 25. MOTHER'S MAIDEN NAME SURNAME MASCARIÑAS FIRST NAME **FELISA** MIDDI F NAME ABELLANA (Continue on separate sheet if necessary) **EDUCATIONAL BACKGROUND** CHOLARSHIP PERIOD OF ATTENDANCE HIGHEST LEVEL NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR LEVEL **ACADEMIC** UNITS EARNED (Write in full) (Write in full) GRADUATED HONORS From (if not graduated) To ELEMENTARY Sta Cruz Elementary School Primary Education 1968 1973 1973 SECONDARY Baybay High School Secondary Education 1973 1977 1977 VOCATIONAL / Samson Technical and Fashion School Automotive Mechanic 1980 1981 1981 TRADE COURSE COLLEGE University of Cebu BS Information in Computer Science 1990 1993 1993 GRADUATE STUDIES NA

SIGNATURE

DATE

cha. Earl

AND RESIDENCE OF THE PARTY.	RVICE ELIG			DATE OF				LICENSE (if a	oplicable)
77. , CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE		RATING (If Applicable)	DATE OF EXAMINATION / PLACE OF EXAMINAT		TION / CONFERMENT		NUMBER	Date of	
BAF	RANGAY ELIGIBI N	LITY / DRIVER'S LICENSE	(ii Applicable)	CONFERMENT				NOMBER	Validity
			(Coi	ntinue on separate sheet if r	ecessary)				
	XPERIENCE ate employme	ent. Start from your recent	work) Description of	duties should be indic	cated in the attached Work	Experience	MICHIGAN PROPERTY.		
	JSIVE DATES m/dd/yyyy)	POSITIOI (Write in full/Do			ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
09/01/2005	Present	Administrative Aide III		Institute of Tropical E Management	Institute of Tropical Ecology and Environmental Management		03-1	Casual	Yes
7/01/2005	08/30/2005	Emergency Data Encoder Ma	chne Operator	University Review C	enter	5000.00	NA	Laborer	Yes
06/08/2003	06/31/2005	Emergency Laborer		University Review C	University Review Center		NA	Laborer	Yes
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CS FORM 212 (Howlsed 2017), Page 3 of 4	3TA0		speet If necessar	ajezedas uo anujjuo		SIGNATURE	
ΑИ						AN	gnivinQ
33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		NOILINE	ACTIONS / RECO	ON-ACADEMIC DISTI	N	SPECIAL SKILLS and HOBBIES 32.	.15
		(A	ayeer il necessar	ejeuedes uo enunuo	lo	er information	IHTO ,IIIV
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CONDUCTED/ SPONSORED BY	Type of LD  Ranagerial  Supervisory  Technicaletc)	NUMBER OF HOU	E DATES OF IDANCE (VVVV)	AETTE	SMARDORY DIVINIARTIZNOI	TITLE OF LEARNING AND DEVELOPMENT INTERVENT (Write in full)	30
	(suojijsod jejiabeue		ENDED	TTA 2MARBOR	VENTIONS/TRAINING P	e wost tecent L&D/Teining program and include only NUING AND DEVELOPMENT (L&B) INTER	
		(1	sheet if necessar	aje.redas uo anunuo	0)		
NAME OF TAXABLE PARTY.			oī	пол		(NOT III ANIAA)	. <b>A</b> N
POSITION / NATURE OF WORK	SE	NUMBER OF HOUR	VE DATES		NOITA	NAME & ADDRESS OF ORGANIX (Write in full)	s '6Z

A			
34.	Are you related by consanguinity or affinity to the appointinchief of bureau or office or to the person who has immediate Bureau or Department where you will be appointed,		
	a. within the third degree?		YES NO
	b. within the fourth degree (for Local Government Unit - Ca	reer Employees)?	YES NO
			If YES, give details:
35.	a. Have you ever been found guilty of any administrative of	ifense?	YES Ø NO
			If YES, give details:
	b. Have you been criminally charged before any court?		☐ YES ☑ NO
	b. Have you been driffinally charged belove any court.		If YES, give details:
			Date Filed:
			Status of Case/s:
36.	Have you ever been convicted of any crime or violation of a	any law, decree, ordinance or regulation by	☐ YES ☑ NO
	any court or tribunal?		If YES, give details:
37.	Have you ever been separated from the service in any of the		☐ YES ☑ NO
	retirement, dropped from the rolls, dismissal, termination, e	end of term, finished contract or phased out	If YES, give details:
	(abolition) in the public or private sector?		
38.	a. Have you ever been a candidate in a national or local el Barangay election)?	ection neid within the last year (except	☐ YES ☑ NO
			If YES, give details:
	b. Have you resigned from the government service during		☐ YES ☑ NO
	election to promote/actively campaign for a national or loca		If YES, give details:
39.	Have you acquired the status of an immigrant or permaner	nt resident of another country?	☐ YES ☑ NO
			If YES, give details (country):
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M.	agna Carta for Disabled Domana (DA	
40.	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972		
a.	Are you a member of any indigenous group?	,, place anower the following terms.	YES INO
	,		If YES, please specify:
b.	Are you a person with disability?		☐ YES ☑ NO
			If YES, please specify ID No:
C.	Are you a solo parent?		☐ YES ☑ NO
_			If YES, please specify ID No:
41.	REFERENCES (Person not related by consanguinity or affinity to applicant		
-	NAME	ADDRESS	TEL. NO.
-	f. HUMBERTO R. MONTES, JR.	VSU, Baybay City, Leyte	NA
-	f. MARLITO M. BANDE	VSU, Baybay City, Leyte	NA V
_	f. SENONA A. CESAR	VSU, Baybay City, Leyte	NA
42.	I declare under oath that I have personally accomplished	ed this Personal Data Sheet which is a tr	rue, correct and
	complete statement pursuant to the provisions of pertipolar Philippines. I authorize the agency head/authorized representations.	inent laws, rules and regulations of the	Republic of the
	agree that any misrepresentation made in this doc	sument and its attachments shall cause	e the filing of PHOTO
	administrative/criminal case/s against me.	and the diagrams of the sauce	o the filling of
F			W. 2282
P	COVERNMENT ISSUED ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance		
	overnment Issued ID: Driver's License	10/00	
۱ŀ	Dirior o Elourido	Silly	
۱ŀ	D/License/Passport No.: D04-84-007545	Signatule (Sign inside the but	ox)
D	ate/Place of Issuance: Baybay City, Leyte	Date Accomplished	Right Thumbmark
	SUBSCRIBED AND SWORN to before me this	1 7 FEB 2021 , affiant exhibiting	ng his/her validly issued government ID as indicated above.
		, amant exhibiting	THE TOTAL VALUE BOUND GOVERNMENT IN AS HUGGREU ADOVE.
	1	ATTY, PASANZ, GUINOCOR	
		VSU Chief Legal Officer	
		Person Administering Oati	h