

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	BANSAL		
FIRST NAME	JAY	NAME EXTENSION (JR., SR) NA	
MIDDLE NAME	CUSTODIO		
3. DATE OF BIRTH (mm/dd/yyyy)	FEBRUARY 10, 1987	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	MACARTHUR, 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	SAN VICENTE STREET, POBLACION DISTRICT 3, MACARTHUR, LEYTE House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
7. HEIGHT (m)	5'4	ZIP CODE	6509
8. WEIGHT (kg)	62		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	SAN VICENTE, STREET, MACARTHUR, LEYTE House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
10. GSIS ID NO.	2004146990	ZIP CODE	6509
11. PAG-IBIG ID NO.	170000891068		
12. PHILHEALTH NO.	13-050083909-1	19. TELEPHONE NO.	9489762630
13. SSS NO.	0628190813	20. MOBILE NO.	09489762630
14. TIN NO.	261-643-080	21. E-MAIL ADDRESS (if any)	jay.bansale@vsu.edu.ph
15. AGENCY EMPLOYEE NO.	V01155		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	NA		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NA	NAME EXTENSION (JR., SR)	NA	NA
MIDDLE NAME	NA		NA	NA
OCCUPATION	NA		NA	NA
EMPLOYER/BUSINESS NAME	NA		NA	NA
BUSINESS ADDRESS	NA		NA	NA
TELEPHONE NO.	NA		NA	NA
24. FATHER'S SURNAME	BANSAL			
FIRST NAME	BRAULIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	MENDE			
25. MOTHER'S MAIDEN NAME				
SURNAME	CUSTODIO			
FIRST NAME	MA.EVELYN			
MIDDLE NAME	OLMEDO			

(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	MACARTHUR CENTRAL SCHOOL	Elementary Graduate	1994	2000	GRADUATED	2000	NONE
SECONDARY	MACARTHUR NATIONAL HIGH SCHOOL	High School Graduate	2000	2004	GRADUATED	2004	NONE
VOCATIONAL / TRADE COURSE	NA	NA	NA	NA	NA	NA	NA
COLLEGE	LEYTE NORMAL UNIVERSITY	BACHELOR OF SECONDARY EDUCATION	2004	2008	GRADUATED	2008	NONE
GRADUATE STUDIES	LEYTE NORMAL UNIVERSITY	MASTER OF ARTS IN TEACHING SOCIAL SCIENCE	2011	2016	GRADUATED	2016	NONE

(Continue on separate sheet if necessary)

SIGNATURE		DATE	February 8, 2022
-----------	---	------	------------------

[illegible]

18. INCLUSIVE DATES _____

[illegible]

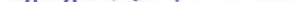
SIGNATURE	<i>Gyrosn</i>	DATE	February 8, 2022
-----------	---------------	------	------------------

[illegible]

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)

(Continue on separate sheet if necessary)

[illegible]


SIGNATURE		DATE	FeBRUARY 8, 2022
-----------	---	------	------------------

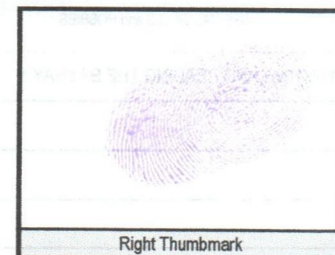
34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input 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.
DR. ARIEL B. LUNZAGA	LEYTE NORMAL UNIVERSITY	9554833605
DR. ELIZABETH QUIMBO	LEYTE NORMAL UNIVERSITY	9205476512
ABIGAIL M. CABAGUING	SAMAR STATE UNIVERSITY	9489905670
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.		




Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	
Government Issued ID:	Passport ID
ID/License/Passport No.:	P421456608
Date/Place of Issuance:	TACLOBAN CITY

	
Signature (Sign inside the box)	
February 8, 2022	
Date Accomplished	



SUBSCRIBED AND SWORN to before me this 03 MAR 2022, affiant exhibiting his/her validly issued government ID as indicated above.

 ATTY. RYSAM C. GUINOCOR YSU Chief Legal Officer
Person Administering Oath