

## 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.**

J. CS ID N

(Do not fill up. For CSC use only)

### I. PERSONAL INFORMATION

2. SURNAME	BORNIA S		
FIRST NAME	NELITA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	CUYOS		
3. DATE OF BIRTH (mm/dd/yyyy)	9/1/1967	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	Manlilisid Javier, Leyte	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" 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 Guadalupe Subdivision/Village Barangay Baybay Leyte City/Municipality Province
7. HEIGHT (m)	1.42 m	ZIP CODE	6521
8. WEIGHT (kg)	49.9 kg	18. PERMANENT ADDRESS	House/Block/Lot No. Street Guadalupe Subdivision/Village Barangay Baybay Leyte City/Municipality Province
9. BLOOD TYPE	"O"	ZIP CODE	6521
10. GSIS ID NO.	B67T1NPC017	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	1700-0028-4021	20. MOBILE NO.	09265130803
12. PHILHEALTH NO.	13-000015276-6	21. E-MAIL ADDRESS (if any)	nbornias@yahoo.com
13. SSS NO.	N/A		
14. TIN NO.	915-327-356		
15. AGENCY EMPLOYEE NO.	V00660		

### II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Bornias	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Ricardo	NAME EXTENSION (JR., SR)	Richienel C. Bornias
MIDDLE NAME	Bulahan		Renelyn C. Bornias
OCCUPATION	Laborer		
EMPLOYER/BUSINESS NAME	OVPREI, VSU		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	N/A		
24. FATHER'S SURNAME	Cuyos		
FIRST NAME	Cresenciano	Sr.	
MIDDLE NAME	Arcelo		
25. MOTHER'S MAIDEN NAME			
SURNAME	Pepito		
FIRST NAME	Norberta		
MIDDLE NAME	Bughao		

(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	YEAR R GRA DUA	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	Manlilisid Elementary School	Elementary	1973	1979	Graduated	1979	N/A
SECONDARY	Abuyog Academy	High School	1979	1983	Graduated	1983	N/A
VOCATIONAL / TRADE COURSE	University of the Visayas (Main Campus)	Junior Secretarial Course	1983	1985	Graduated	1985	N/A
COLLEGE	Visayas State College of Agriculture (VISCA) VSU	Bachelor of Science in Agriculture major in Horticulture	1985	1992	Graduated	1992	N/A
GRADUATE STUDIES	Visayas State University (VSU)	Master of Science in Horticulture	1993	2007	22	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	6-30-22	CS FORM 212 (Revised 2017), Page 1 of 1
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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>[Signature]</i>	DATE	6-30-22	CS FORM 212 (Revised 2017), Page 2 of 4
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## VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	Guadalupe Chapel Pastoral Council (GCPC)	8/10/2018	Present	1-2 (Sat./Sun)	Treasurer
	Guadalupe Consumers Cooperative (GCC)	2/6/2018	Present	1-3 (Sat.)	Board, Vice Chairman
	Philippine Association for Plant Tissue Culture & Biotechnology (PAPTCB)	6/10/2010	Present	N/A	Member
	Guadalupe Catholic Choir Ensemble (GuCCE)	11/10/1996	Present	1-2 (Sat./Sun)	Treasurer
	Gamma Epsilon Fraternity/Gamma Lambda Epsilon Sorority (FALCONS)	11/30/1989	Present	N/A	Member

(Continue on separate sheet if necessary)

#### VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

(Continue on separate sheet if necessary)



## VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Propagate Horticultural Crops through Tissue Culture & other means, arranged flowers/stage décoration, Computer skills & typing		N/A	VSU-Administrative Personnel Association
				VSU Alumni Association

(Continue on separate sheet if necessary)

SIGNATURE		DATE	6-30-22	CS FORM 212 (Revised 2017), Page 3 of 3
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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)													
<table><thead><tr><th>NAME</th><th>ADDRESS</th><th>CEL. NO.</th></tr></thead><tbody><tr><td>Asst. Prof. Gloria E. Bancale</td><td>Dept. of Horticulture, VSU</td><td>09166028165</td></tr><tr><td>Asst. Prof. Roden D. Troyo</td><td>Dept. of Horticulture, VSU</td><td>09059051440</td></tr><tr><td>Dr. Catherine C. Arradaza</td><td>Dept. of Horticulture, VSU</td><td>09156472200</td></tr></tbody></table>		NAME	ADDRESS	CEL. NO.	Asst. Prof. Gloria E. Bancale	Dept. of Horticulture, VSU	09166028165	Asst. Prof. Roden D. Troyo	Dept. of Horticulture, VSU	09059051440	Dr. Catherine C. Arradaza	Dept. of Horticulture, VSU	09156472200
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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.													
<table><tr><td>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td><td rowspan="4"><div>Signature (Sign inside the box)</div><div>6-30-22</div><div>Date Accomplished</div></td></tr><tr><td>Government Issued ID: PhilHealth ID</td></tr><tr><td>ID/License/Passport No.: 13-000015276-6</td></tr><tr><td>Date/Place of Issuance: Baybay City, Leyte</td></tr></table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	<div>Signature (Sign inside the box)</div> <div>6-30-22</div> <div>Date Accomplished</div>	Government Issued ID: PhilHealth ID	ID/License/Passport No.: 13-000015276-6	Date/Place of Issuance: Baybay City, Leyte	<div> MELITA C. BORNIA</div> <div> Right Thumbmark</div>							
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SUBSCRIBED AND SWORN to before me this 04 AUG 2022, affiant exhibiting his/her validly issued government ID as indicated above.													
<div>ATTY. RYSAN L. GUINOCOR VSU Chief Legal Officer</div> <div>Person Administering Oath</div>													