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CS	Form	No.	21
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## **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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. 1. CS ID No. Print legibly. Tick appropriate boxes ( and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use only) 2. SURNAME POLE NAME EXTENSION (JR SR) FIRST NAME LUCIO MIDDLE NAME CARTA 3. DATE OF BIRTH 07/23/1973 16. CITIZENSHIP (mm/dd/yyyy) **☑** Filipino ☐ Dual Citizenship ✓ by birth by naturalization 4. PLACE OF BIRTH BAYBAY, LEYTE If holder of dual citizenship, Pls. indicate country: please indicate the details ✓ Male ☐ Female 5. SEX ☐ Single ✓ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No. ☐ Widowed Street ☐ Separated HIPUSNGO Other/s: Subdivision/Village Barangay **BAYBAY** LEYTE 7. HEIGHT (m) 5'5" City/Municipality Province 8. WEIGHT (kg) 64kg ZIP CODE 6521-A 18. PERMANENT ADDRESS HIPUSNGO 9. BLOOD TYPE "0" House/Block/Lot No. Street BAYBAY LEYTE 10. GSIS ID NO. 200-47968-98 Barangay Subdivision/Village 11 PAG-IBIG ID NO 916-195161-091 City/Municipality Province 12. PHILHEALTH NO. 13-200413033-6 ZIP CODE 6521-A 3339426129 13. SSS NO. 19. TELEPHONE NO. N/A 14. TIN NO. 947-762-563 20. MOBILE NO. 0926-556474 15. AGENCY EMPLOYEE NO. NONE 21. E-MAIL ADDRESS (if anv) N/A FAMILY BACKGROUN POLE 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME **ANGELITA** ALLANA MAE P. POLE 12/18/2002 MIDDLE NAME **OMAPAS** JUNJIE P. POLE 01/27/1999 HOUSEWIFE OCCUPATION ANGELICA P. POLE 03/25/1997 EMPLOYER/BUSINESS NAME N/A ARDE JOHN P. POLE 11/08/1995 N/A **BUSINESS ADDRESS** N/A TELEPHONE NO 24. FATHER'S SURNAME POLE NAME EXTENSION (JR., SR) LUCIO FIRST NAME MIDDLE NAME NEMENCIO 25. MOTHER'S MAIDEN NAME CARTA SURNAME FIRST NAME **EUSTIQUIA** MIDDLE NAME **FLORES** (Continue on separate sheet if necessary) SCHOLARSHIP HIGHEST LEVEL/ NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE PERIOD OF ATTENDANCE ACADEMIC HONORS LEVEL YEAR UNITS EARNED (Write in full) (Write in full) GRADUATED (if not graduated) From To RECEIVED ELEMENTARY HIPUSNGO ELEMENTARY SCHOOL PRIMARY EDUCATION 1981 1987 GRADUATED 1987 N/A BAYBAY HIGH SCHOOL SECONDARY **SECONDARY EDUCATION GRADUATE** 1987 GRADUATED 1991 N/A VOCATIONAL / N/A TRADE COURSE COLLEGE NA **GRADUATE STUDIES** NA N/A SIGNATURE DATE January 6, 2023

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	ANGAY ELIGIBIL	ITY / DRIVER'S LICENSE	(If Applicable)	CONFERMENT	- Control Vi			NUMBER	Validi
TESDA NC11 ELECTRICAL INSTALLATION & N/A MAINTENANCE		March 7, 2016	VOCATIONAL SCHOOL		16083702002288	March 2021			
			(C	ontinue on separate sheet i	f necessary)				
	XPERIENCE te employme	nt. Start from your recent				Work Experi	ence sheet.		
INCLUS	SIVE DATES n/dd/yyyy)	POSITION TI (Write in full/Do not	TLE	DEPARTMENT / AGE	NCY / OFFICE / COMPANY Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV SERV (Y/ N
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/01/2009	10/31/2015	FOREMAN		VISAYAS STATE UNIVE DIVISION - IDBMU	RSITY/GENERAL SERVICES	8,800.00	N/A	JOB ORDER	YE
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), NAME & ADDRESS OF O (Write in ful		INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS		POSITION / NATURE OF WORK	
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II. LEARNING AND DEVELOPMENT (L&D)		ntinue on separate s	PRINTED BY THE PRINTE	)			
II. LEARNING AND DEVELOPIMENT (L&D) tart from the most recent L&D/training program and incl.				nief/Executive/Mana	agerial positions)		
(a) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )		INCLUSIVE DATES OF			Type of LD		
0. TITLE OF LEARNING AND DEVELOPMENT INT		ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	( Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY	
(Write in fu	<b>")</b>	From	То		Technical/etc)	(Write in full)  VISAYAS STATE UNIVERSITY/OFFICE OF THE VICE	
TRATEGIC DI ANNING MODICENOR		02/15/2017	02/16/2017	16 hours	Managerial		
TRATEGIC PLANNING WORKSHOP						PRESIDENT	
IV WORKPLACE SEMINAR	1 4	01/15/1995	01/15/1995	08 hours	Prevention	VISAYAS STATE UNIVERSITY HOSPITAL	
EMINAR ON DEFENSIVE DRIVING		10/26/2016	10/26/2016	08 hours	Technical	LAND TRANSPORTATION OFFICE	
ORKSHOP ON PUBLIC ACCOUNTABILITY, CUSTO	OMER SERVICE & PMS-OPES FOR	01/19/2010	01/19/2010	08 hours	Customer Service	VISAYAS STATE UNIVERSITY	
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ANII OTHER MEADINATION	(C	ontinue on separate	Sneet II Necessa	( <b>)</b>			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				33. MEMBERSHIP IN ASSOCIATION/ORGANIZAT (Write in full)		
2.00	(WILE III LUB)					LSU, ADMINISTRATIVE PERSONNE	
N/A						ASSOCIATION	
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SIGNATURE	NO CA				DATE	January 6, 2023	

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34.	Are you related by consanguinity or affinity to the appointin chief 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 V	NO				
	b. within the fourth degree (for Local Government Unit - Ca	☐ YES ✓	NO				
			If YES, give details:				
35.	a. Have you ever been found guilty of any administrative of	ffense?	YES V	] NO			
			If YES, give details:				
	b. Have you been criminally charged before any court?		☐ YES [√	no			
			If YES, give details:				
			Date Filed:				
		The state of the s	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			✓ NO			
	retirement, dropped from the rolls, dismissal, termination, e (abolition) in the public or private sector?	If YES, give details:					
38.	Have you ever been a candidate in a national or local ele Barangay election)?	☐ YES ☑ NO If YES, give details:					
	b. Have you resigned from the government service during to election to promote/actively campaign for a national or local	☐ YES ☑ NO If YES, give details:					
39.	Have you acquired the status of an immigrant or permanen	nt resident of another country?					
		☐ YES ☑ NO If YES, give details (country):					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	egna Carta for Dinabled Pemana (DA					
	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?	, , ,					
	, and the same of		YES If YES, please specify:	✓ NO			
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	: /appointee)					
	NAME	ADDRESS	TEL. NO.				
ENC	GR. MARIO LILIO P. VALENZONA	VISAYAS STATE UNIVERSITY, BAYBAY CITY, LEYTE	0917-6341514				
ENC	GR. MARLON G. BURLAS	VISAYAS STATE UNIVERSITY, BAYBAY CITY, LEYTE	0917-6341520				
-	GR. ROBERTO C. GUARTE	VISAYAS STATE UNIVERSITY, BAYBAY CITY, LEYTE	0917-3108078	18			
42.	I declare under oath that I have personally accomplished	d this Personal Data Sheet which is a tr	rue, correct and				
	complete statement pursuant to the provisions of pertir	nent laws, rules and regulations of the	Republic of the	Open.			
	Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this docu	entative to verify/validate the contents state	d herein.	PHOTO			
	administrative/criminal case/s against me.	amont and its attachments shall cause	s the filling of	Photo			
G	overnment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)			Son Williams			
	LEASE INDICATE ID Number and Date of Issuance						
Go	overnment Issued ID: VSU ID	de					
ID	/License/Passport No.: V000895						
H		ox)					
Da	te/Place of Issuance: BAYBAY CITY, LEYTE	January 6, 2023 Date Accomplished		Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this2	5 JAN 2023 , affiant exhibition	g his/her validly issued gove	ernment ID as indicated above.			
		ATTURNAY GIMOCON					
		- Vinney					
		Person Administering Oatl	1 / 8				