

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 () ☐ 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	PAMAOS		
FIRST NAME	LES ANDRE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	BAGA		
3. DATE OF BIRTH (mm/dd/yyyy)	11/30/1993	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	SAINT BERNARD, SOUTHERN 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 checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:		
7. HEIGHT (m)	5'0	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street PUROK 5 MAHAYAHAY Subdivision/Village Barangay SAINT BERNARD SOUTHERN LEYTE City/Municipality Province
8. WEIGHT (kg)	50 kg	ZIP CODE	6616
9. BLOOD TYPE	N/A	18. PERMANENT ADDRESS	House/Block/Lot No. Street PUROK 5 MAHAYAHAY Subdivision/Village Barangay SAINT BERNARD SOUTHERN LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6616
11. PAG-IBIG ID NO.	1211-3690-6178	19. TELEPHONE NO.	N/A
12. PHILHEALTH NO.	12-051401759-5	20. MOBILE NO.	09639649957
13. SSS NO.	0111-4846698-7	21. E-MAIL ADDRESS (if any)	lesandre.pamaos@vsu.edu.ph
14. TIN NO.	454810898000		
15. AGENCY EMPLOYEE NO.	N/A		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	23. NAME of CHILDREN (Write full name and list all)		DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	N/A	N/A
MIDDLE NAME	N/A		
OCCUPATION	N/A		
EMPLOYER/BUSINESS NAME	N/A		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	N/A		
24. FATHER'S SURNAME	25. MOTHER'S MAIDEN NAME		
FIRST NAME	ESMERALDO		
MIDDLE NAME	PULVERA		
SURNAME	BAGA		
FIRST NAME	LEONILA		
MIDDLE NAME	TALABOC	(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	MAHAYAHAY ELEMENTARY SCHOOL	ELEMENTARY	2000	2006	N/A	2006	2ND HON. MENTION
SECONDARY	CRISTO REY REGIONAL HIGH SCHOOL	HIGH SCHOOL	2006	2010	N/A	2010	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRIBUSINESS	2010	2014	N/A	2014	N/A
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF MANAGEMENT MAJOR IN BUSINESS MANAGEMENT	2019	PRESENT	15 UNITS	N/A	N/A

(Continue on separate sheet if necessary)


SIGNATURE	DATE
	3/21/2022

[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		DATE	3/21/2022
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3/21/2022

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

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

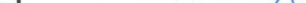
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)

[illegible]

(Continue on separate sheet if necessary)

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	3/21/2022
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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)?

☐ YES☒ NO

☐ YES☒ 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?

☐ YES☒ NO

If YES, give details:

☐ YES☒ 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?

☐ YES☒ 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?

☐ YES☒ 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?

☐ YES☒ NO

If YES, give details: _____

☐ YES☒ NO

If YES, give details: _____

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES☒ 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?

☐ YES☒ NO

If YES, please specify: _____

☐ YES☒ NO

If YES, please specify ID No: _____

☐ YES☒ NO

If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
DR. EDGARDO E. TULIN	VISAYAS STATE UNIVERSITY	563-7067
DR. ALLEN GLENNIE P. LAMBERT	VISAYAS STATE UNIVERSITY	563-7067
MS. ERALYN PIUS	SM HYPERMARKET, LLC, CEBU	09264429095

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.

PHOTO

Right Thumbmark

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.: P3627851A

Date/Place of Issuance: 07/10/2017 TACLOBAN CITY

Signature (Sign inside the box)

31 APR 2022

Date Accomplished

SUBSCRIBED AND SWORN to before me this 07 APR 2022, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. RYSAN L. GUINOCOR
VSU Chief Legal Officer

Person Administering Oath

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