

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	TROYO		
FIRST NAME	ANITA	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	DY		
3. DATE OF BIRTH (mm/dd/yyyy)	APRIL 27, 1956	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	BUNGA, BAYBAY CITY, 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 Bunga Subdivision/Village Barangay Baybay Leyte City/Municipality Province ZIP CODE 6521-A
7. HEIGHT (m)	5'2"	18. PERMANENT ADDRESS	House/Block/Lot No. Street Bunga Subdivision/Village Barangay Baybay Leyte City/Municipality Province ZIP CODE 6521-A
8. WEIGHT (kg)	50	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	"A"	20. MOBILE NO.	09362425332
10. GSIS ID NO.	56042702663	21. E-MAIL ADDRESS (if any)	troyoanita@gmail.com
11. PAG-IBIG ID NO.	1700-0026-3685		
12. PHILHEALTH NO.	13-000014278-7		
13. SSS NO.	N/A		
14. TIN NO.	116-627-348		
15. AGENCY EMPLOYEE NO.	V00683		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	TROYO		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ENRIQUE	NAME EXTENSION (JR., SR) N/A	RODEN D. TROYO	11/14/1984
MIDDLE NAME	CONDES		JENNIE D. TROYO	1/21/1986
OCCUPATION	RETIRED PHILIPPINE NATIONAL POLICE OFFICER			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	DY			
FIRST NAME	ARSENIO	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	YU			
25. MOTHER'S MAIDEN NAME				
SURNAME	MORALES			
FIRST NAME	MAMERTA			
MIDDLE NAME	CALUMBA			

(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	BUNGA ELEMENTARY SCHOOL	PRIMARY EDUCATION	1963	1969	N/A	1969	N/A
SECONDARY	BAYBAY HIGH SCHOOL	HIGH SCHOOL	1969	1973	N/A	1973	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE COLLEGE OF AGRICULTURE	CROP PRODUCTION TECHNICIAN	1974	1976	N/A	1976	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE	Adityo	DATE	05-20-2020	CS FORM 212 (Revised 2017), Page 1 of 4
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27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	N/A					

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	Aditya	DATE	05-20-2020	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		
	N/A				

(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)

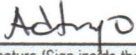
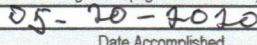
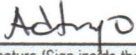
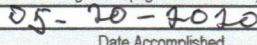
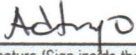
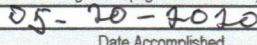
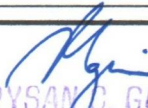
30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	1st Leyte Cassava Congress	9/25/2018	9/25/2018	8 hrs	Technical	Philrootcrops, C.A.R.E.
	1st Visayas-Wide Cassava Congress	9/26/2018	9/27/2018	16 hrs	Technical	ATI, Philrootcrops, DA
	Season-long Training of trainers on Gap on Cassava Production	4/11/2016	8/26/2016	120 hrs.	Technical	Agricultural Training Institute Region 8
	National Workshop on Invasive Pests and Diseases of Cassava	3/14/2016	3/17/2016	24hrs	Technical	Philippine Rootcrops Research and Training Center
	27th Joint VICARP RRDEN Regional Research Development & Extension Symposium	12/3/2015	12/4/2015	16hrs	Technical	Visayas Consortium for Agriculture, Aquatic and Resources Program
	Seminar on Regionwide Response to Emerging Pests and Diseases	1/27/2015		3hrs	Technical	Centro Internacional dela Agricultural Tropika

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Typing		N/A		Administrative Personnel Association (ADPA)
	Cooking				ALUMNI
	Dancing				
	Singing				

(Continue on separate sheet if necessary)

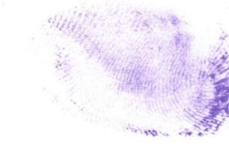
<p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">Status of Case/s: _____</p>												
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>												
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>												
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant / appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>Dr. Jose L. Bacusmo</td> <td>Visayas Consortium for Agriculture, Aquatic and Resources Program (VICAARP)</td> <td>563-7458</td> </tr> <tr> <td>Cynthia Dolores V. Godoy</td> <td>VISCA, Baybay City, Leyte</td> <td>563-7229</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Dr. Jose L. Bacusmo	Visayas Consortium for Agriculture, Aquatic and Resources Program (VICAARP)	563-7458	Cynthia Dolores V. Godoy	VISCA, Baybay City, Leyte	563-7229			
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<p>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.</p>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td colspan="2">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID:</td> <td>Senior citizen ID</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>2015-02843</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>5/03/2016, 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		Government Issued ID:	Senior citizen ID	ID/License/Passport No.:	2015-02843	Date/Place of Issuance:	5/03/2016, Baybay City, Leyte	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">  Signature (Sign inside the box) </td> </tr> <tr> <td style="text-align: center;">  Date Accomplished </td> </tr> </table>	 Signature (Sign inside the box)	 Date Accomplished
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 Date Accomplished													
<p>SUBSCRIBED AND SWORN to before me this <u>30 JUN 2020</u>, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="text-align: center;">  ATTY. RYLAND GUINOCOR VS. LEGAL OFFICER Person Administering Oath </div>													

ID picture taken within the last 6 months
3.5 cm. X 4.5 cm (passport size)

With full and handwritten name tag and signature over printed name

Computer generated or photocopied picture is not acceptable

PHOTO


 Right Thumbmark