

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	PEREZ		
FIRST NAME	JOSE CELSO	NAME EXTENSION (JR., SR) JR.	
MIDDLE NAME	SIEGA		
3. DATE OF BIRTH (mm/dd/yyyy)	1/12/1992	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input checked="" type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input checked="" type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	ORMOC CITY, LEYTE	If holder of dual citizenship, please indicate the details.	Philippines
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	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
7. HEIGHT (m)	1.63	ZIP CODE	PANGASUGAN BAYBAY LEYTE
8. WEIGHT (kg)	60		6521-A
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	BAGONG BUHAY ORMOC LEYTE
11. PAG-IBIG ID NO.	1212-6679-1502		6541
12. PHILHEALTH NO.	1302-5548-8571	19. TELEPHONE NO.	N/A
13. SSS NO.	06-4377472-2	20. MOBILE NO.	(+63) 928 152 3913
14. TIN NO.	N/A	21. E-MAIL ADDRESS (if any)	jcperezjr18@gmail.com
15. AGENCY EMPLOYEE NO.	N/A		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	PEREZ			
FIRST NAME	JOSE CELSO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	TUNDAG	SR.		
25. MOTHER'S MAIDEN NAME				
SURNAME	SIEGA			
FIRST NAME	ALMA			
MIDDLE NAME	LARAN			

(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	ORMOC CITY CENTRAL SCHOOL	PRIMARY EDUCATION	2005	2011	N/A	2011	3RD HONOR
SECONDARY	NEW ORMOC CITY NATIONAL HIGH SCHOOL	HIGH SCHOOL	2011	2015	N/A	2015	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 SECONDARY EDUCATION (MAJOR IN BIOLOGICAL SCIENCES)	2015	2019	N/A	2019	SUMMA CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

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IV. CIVIL SERVICE ELIGIBILITY						
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
	Licensure Examination for Teachers (LET)	91.40%	9/29/2019	Tacloban City	1799042	12/1/2022
	Honor Graduate Eligibility (PD 907)	N/A	6/20/2019	Tacloban City		

V. WORK EXPERIENCE
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.


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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	N/A	N/A	N/A	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			
	PHILOSOPHIES OF EDUCATION SEMINAR	05/30/2019	05/30/2019	3.0		VISAYAS STATE UNIVERSITY COLLEGE OF EDUCATION
	JOB SEEKING SEMINAR	5/20/2019	5/20/2019	4.0		VISAYAS STATE UNIVERSITY COLLEGE OF EDUCATION
	2019 DOST SCHOLAR'S EXIT CONFERENCE	7/5/2019	7/5/2019	8.0		DOST-REGION VIII
	PAFTE ANNUAL REGIONAL TEACHING CONGRESS	02/23/2019	02/23/2019	8.0		PHILIPPINE ASSOCIATION FOR TEACHERS AND EDUCATORS (PAFTE)-VIII
	INFORMATION DISSEMINATION DRIVE ON DISASTER PREPAREDNESS	4/7/2018	4/7/2018	2.0		NEW ORMOG CITY NATIONAL HIGH SCHOOL- SCIENCE DEPARTMENT
	GENDER-SENSITIVITY EDUCATION SEMINAR	6/8/2018	6/8/2018	3.0		VISAYAS STATE UNIVERSITY COLLEGE OF EDUCATION
	VALUES EDUCATION SEMINAR	6/8/2018	6/8/2018	3.0		VISAYAS STATE UNIVERSITY COLLEGE OF EDUCATION
	COMMUNITY-BASED DISASTER RISK REDUCTION MANAGEMENT (CBDRRM) SEMINAR (DOST PATRIOT PROGRAM PHASE 2)	7/28/2018	7/31/2018	36.0		DOST-REGION VIII
	THE FILIPINO PATRIOT SCHOLAR (DOST PATRIOT PROGRAM PHASE 1)	8/7/2018	8/7/2018	9.0		DOST-REGION VIII
	TRAINING WORKSHOP ON INNOVATIVE LEARNING STRATEGIES	05/15/2018	05/16/2018	9.0		VISAYAS STATE UNIVERSITY COLLEGE OF EDUCATION
	TRAINING SEMINAR ON DISASTER-PREPAREDNESS	04/21/2018	04/21/2018	8.0		ALPHA PHI OMEGA INTERNAT'L COLLEGIATE SERVICE FRATERNITY AND SORORITY, SENIOR STUDENT EVENT PLANNERS (ALPHA SAGE), USSO
	WORKSHOP SERIES ON QUALITATIVE RESEARCH	8/4/2018	04/14/2018	8.0		COLLEGE OF EDUCATION ALLIANCE OF BIOLOGICAL SCIENCES MAJORS
	SEMINAR ON DISASTER RISK REDUCTION	10/14/2017	10/14/2017	8.0		PHILIPPINE INSTITUTE OF CIVIL ENGINEERS VSU STUDENT CHAPTER
	WHERE DO YOU FALL ON THE SPECTRUM OF SEXUALITY? SOGIE 101	7/3/2016	7/3/2016	6.0		VISAYAS STATE UNIVERSITY- DEPARTMENT OF LIBERAL ARTS AND BEHAVIORAL SCIENCES
(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)		
	COMPUTER SKILLS	N/A		N/A		
	ART SKILLS					
	SINGING & DANCING					
	EFFECTIVE COMMUNICATION SKILLS					
	TEACHING SKILLS					
(Continue on separate sheet if necessary)						
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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>TEL. NO.</th></tr></thead><tbody><tr><td>DR. BAYRON S. BARREDO</td><td>VISCA, BAYBAY CITY, LEYTE</td><td>563-7527</td></tr><tr><td>PROF. JOY A. BELLEN</td><td>VISCA, BAYBAY CITY, LEYTE</td><td>563-7527</td></tr><tr><td>DR. CHRISTY M. DESADES</td><td>VISCA, BAYBAY CITY, LEYTE</td><td>563-7027</td></tr></tbody></table>			NAME	ADDRESS	TEL. NO.	DR. BAYRON S. BARREDO	VISCA, BAYBAY CITY, LEYTE	563-7527	PROF. JOY A. BELLEN	VISCA, BAYBAY CITY, LEYTE	563-7527	DR. CHRISTY M. DESADES	VISCA, BAYBAY CITY, LEYTE	563-7027
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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.		<div> JOSE CELSO S. PEREZ, JR. PHOTO</div> <div> Right Thumbmark</div>												
<div>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: PRC ID</div> <div>ID/License/Passport No.: 1799042</div> <div>Date/Place of Issuance: ORMOC CITY</div>		<div> Signature (Sign inside the box) 01/17/20 Date Accomplished</div>												
SUBSCRIBED AND SWORN to before me this FEB 13 2020 , affiant exhibiting his/her validly issued government ID as indicated above.														
<div>ATTY. RYSAN C. GUINOCOR VSU LEGAL OFFICER Person Administering Oath</div>														