

# 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	GALGO			
FIRST NAME	CHRISTOPHER	JR		
MIDDLE NAME	RATILLA			
3. DATE OF BIRTH (mm/dd/yyyy)	1/23/1994	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	BAYBAY CITY, LEYTE	If holder of dual citizenship, please indicate the details.		
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 checked="" type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	Zone 3 House/Block/Lot No. Street N/A Patag Subdivision/Village Barangay Baybay Leyte City/Municipality Province 6521	
7. HEIGHT (m)	1.63	18. PERMANENT ADDRESS	Zone 3 House/Block/Lot No. Street N/A Patag Subdivision/Village Barangay Baybay Leyte City/Municipality Province 6521	
8. WEIGHT (kg)	56		ZIP CODE	6521
9. BLOOD TYPE				
10. GSIS ID NO.	N/A			
11. PAG-IBIG ID NO.	1211-4753-1563			
12. PHILHEALTH NO.	12-025446900-4			
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A	
14. TIN NO.	466-285-398	20. MOBILE NO.	+639155190495	
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	chris.galgo1@gmail.com	

## 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	N/A	NAME EXTENSION (Jr., Sr.)	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	GALGO			
FIRST NAME	Christopher	Sr		
MIDDLE NAME	Cabantac			
25. MOTHER'S MAIDEN NAME	Ratilla			
SURNAME	Galgo			
FIRST NAME	Siria			
MIDDLE NAME	Cabusao			

(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	Patag Elementary School	BASIC EDUCATION	6/1/2000	3/1/2006	Graduated	2006	Valedictorian
SECONDARY	Visayas State University Laboratory High School (VSU-LHS)	High School	6/1/2006	3/1/2010	Graduated	2010	7th in Rank
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	6/1/2010	5/1/2014	Graduated	2014	Magna Cum Laude
GRADUATE STUDIES	Universiteit Gent, Universita Pisa, Mekong Delta Development Research Center	International Master of Science in Rural Development	9/1/2017	9/1/2019	Graduated	2019	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	January 15, 2020
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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		DATE	January 15, 2020
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[illegible]

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







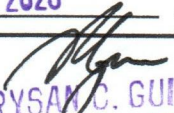
[illegible]

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	R		Not applicable		Society of Agribusiness Students, 2010-2014
	GAMS				
	Dancing				

SIGNATURE		DATE	January 15, 2020
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<p>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,</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>Date Filed: _____</p> <p>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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: <u>finished</u></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: 40%;">NAME</th> <th style="width: 40%;">ADDRESS</th> <th style="width: 20%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>Assistant Prof dr. Hans De Steur</td> <td>International Training Center – Faculty of Bioscience Engineering Ghent</td> <td></td> </tr> <tr> <td>dr. Julieta R. Roa</td> <td>PhilRootcrops Research and Training Centre</td> <td></td> </tr> <tr> <td>dr. Pam Abit</td> <td>Iowa State University</td> <td></td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Assistant Prof dr. Hans De Steur	International Training Center – Faculty of Bioscience Engineering Ghent		dr. Julieta R. Roa	PhilRootcrops Research and Training Centre		dr. Pam Abit	Iowa State University	
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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>Passport</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td>P4214320B</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>12-13-19 DFA Cebu</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:	Passport	ID/License/Passport No.:	P4214320B	Date/Place of Issuance:	12-13-19 DFA Cebu	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">           Signature (Sign inside the box)          January 15, 2020          Date Accomplished       </td> <td style="text-align: center;">           Right Thumbprint       </td> </tr> </table>	 Signature (Sign inside the box) January 15, 2020 Date Accomplished	 Right Thumbprint
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<p>SUBSCRIBED AND SWORN to before me this <u>MAR 11 2020</u>, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="text-align: center;">   <b>ATTY. RYSAN C. GUINOCOR</b>          SULEGAL OFFICER          Person Administering Oath       </div>													