

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	CAINTIC		
FIRST NAME	REYNA MAE	NAME EXTENSION (JR, SR)	
MIDDLE NAME	CORNITES		
3. DATE OF BIRTH (mm/dd/yyyy)	4/24/1991	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	Brgy. Guadalupe Baybay, 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:	17. RESIDENTIAL ADDRESS	N/A N/A House/Block/Lot No. Street N/A GUADALUPE Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.54	ZIP CODE	
8. WEIGHT (kg)	50		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	N/A N/A House/Block/Lot No. Street N/A GUADALUPE Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
10. GSIS ID NO.	On process	ZIP CODE	6521-A
11. PAG-IBIG ID NO.	1211-5840-8409		
12. PHILHEALTH NO.	13-202028635-4		
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A
14. TIN NO.	335-109-973	20. MOBILE NO.	09105028871
15. AGENCY EMPLOYEE NO.	V00908	21. E-MAIL ADDRESS (if any)	reynamaecaintic@yahoo.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		NAME EXTENSION (JR., SR)	N/A	
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	CAINTIC			
FIRST NAME	REYNALDO	JR		
MIDDLE NAME	TOLIBAS			
25. MOTHER'S MAIDEN NAME	CORNITES			
SURNAME	CAINTIC			
FIRST NAME	MELANIA			
MIDDLE NAME	GONATO			

(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	GUADALUPE ELEMENTARY SCHOOL	PRIMARY EDUCATION	1997	2003		2003	WITH HONORS
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	HIGH SCHOOL	2003	2007		2007	
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRICULTURE	2007	2012		2012	CAFAP
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER'S OF SCIENCE IN HORTICULTURE	2012	2016		2016	GTA & DOST THESIS

(Continue on separate sheet if necessary)

SIGNATURE		DATE	June 12, 2019
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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	July 12, 2019
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July 12, 2019

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		
	ADMINISTRATIVE PERSONNEL ASSOCIATION (ADPA)	2016	PRESENT		MEMBER
	SOCIETY OF AGRICULTURAL EDUCATORS IN REGION 8, INC.	6/21/2019	PRESENT		MEMBER

(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			
	PSSN Annual Scientific Conference (ICONSIE 2019)	7/2/2018	7/6/2018	24	TECHNICAL	Palawan State University
	Training on Vegetable Production Organic and GAP Seed Processing Storage	12/27/2018	12/28/2018	16	TECHNICAL	VISAYAS STATE UNIVERSITY
	17th National Vegetable Congress	8/22/2018	8/24/2018	24	TECHNICAL	University of Santo Thomas Manila
	18th PSSN Annual Scientific Conference (ICONSIE 2018)	5/15/2018	5/24/2018	24	TECHNICAL	University of Santo Thomas Manila
	CONSULTATIVE WORKSHOP ON VEGETABLE INDUSTRY ANALYSIS AND DEVELOPMENT DIRECTIONS FOR EASTERN VISAYAS	6/5/2013	6/6/2013	16	TECHNICAL	DEPARTMENT OF AGRICULTURE- RFU 8 & DEPARTMENT OF HORTICULTURE
	TRAINING ON " GRAS COATING TECHNOLOGY TO ENHANCE THE SHELF LIFE OF VEGETABLES"	6/25/2013	6/28/2013	32	TECHNICAL	DEPARTMENT OF AGRICULTURE- RFU 8 & DEPARTMENT OF HORTICULTURE
	TRAINING ON " GRAS COATING TECHNOLOGY TO ENHANCE THE SHELF LIFE OF VEGETABLES"	7/27/2013	7/27/2013	4	TECHNICAL	DEPARTMENT OF HORTICULTURE VSU
	2ND CONSULTATIVE WORKSHOP ON VEGETABLE INDUSTRY ANALYSIS AND DEVELOPMENT DIRECTIONS IN EASTERN VISAYAS	3/20/2014	3/22/2014	24	TECHNICAL	DEPARTMENT OF AGRICULTURE- RFU 8 & DEPARTMENT OF HORTICULTURE
	MAPPING OF SOYBEAN APHID RESISTANCE GENES FROM PLANT INTRODUCTION	10/7/2014	10/7/2014	4	TECHNICAL	VISAYAS STATE UNIVERSITY
	SYMPOSIUM ON HIGH VALUE CROS AND ORGANIC HORTICULTURE DEVELOPMENT FOR ECONOMIC PROSPERITY, FOOD SECURITY AND ECOLOGICAL	5/16/2014	5/16/2014	8	TECHNICAL	VISAYAS STATE UNIVERSITY
	NC11: AGRICULTURE CROP PRODUCTION	9/1/2015	9/5/2015	40	TECHNICAL	TECHNICAL EDUCATION AND SKILLS DEVT AUTHORITY (TESDA)- ATI RTC8-VSU
	SHORT TRAINING COURSE ON HYDROPONICS AND DRIP IRRIGATION INSTALLATION	8/7/2015	8/7/2015	4	TECHNICAL	DEPARTMENT OF HORTICULTURE VSU
	SHORT TRAINING COURSE ON TUBE AND CLEFT GRAFTING OF TOMATO Course	8/8/2015	8/8/2015	4	TECHNICAL	DEPARTMENT OF HORTICULTURE VSU
	SHORT TRAINING COURSE ON FLOWER ARRANGEMENT AND DISH GARDENING	8/9/2015	8/9/2015	4	TECHNICAL	DEPARTMENT OF HORTICULTURE VSU
	TRAINING ON COMMUNAL AND CONTAINER GARDENING	2/18/2017	2/19/2017	16	TECHNICAL	DEPARTMENT OF HORTICULTURE VSU
	TRAINING OF TRAINERS ON INNOVATIVE AND DIVERSIFIED AGRICULTURE FARMING TECHNOLOGIES FOR COMMUNITY DEVELOPMENT	2/7/2017	2/8/2017	16	TECHNICAL	DEPARTMENT OF HORTICULTURE VSU
	TRAINING ON COMMUNAL AND CONTAINER GARDENING	2/26/2017	2/27/2017	16	TECHNICAL	DEPARTMENT OF HORTICULTURE VSU



(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		VISCA HORTICULTURAL SOCIETY
	MARCOTTING				DEPARTMENT OF SCIENCE AND TECHNOLOGY
	GRAFTING				ALUMNI
					ADMINISTRATIVE PERSONNEL ASSOCIATION

(Continue on separate sheet if necessary)

SIGNATURE	DATE
	July 12, 2019

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)?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div><div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div></div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>												
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?		<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)														
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>ROSARIO A. SALAS</td><td>DOH, VSU</td><td>563-7739</td></tr><tr><td>ZENAIDA C. GONZAGA</td><td>DOH, VSU</td><td>563-7739</td></tr><tr><td>DARIO P. LINA</td><td>DOH, VSU</td><td>563-7739</td></tr></table>			NAME	ADDRESS	TEL. NO.	ROSARIO A. SALAS	DOH, VSU	563-7739	ZENAIDA C. GONZAGA	DOH, VSU	563-7739	DARIO P. LINA	DOH, VSU	563-7739
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DARIO P. LINA	DOH, VSU	563-7739												
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>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: VSU ID</div> <div>ID/License/Passport No.: V00908</div> <div>Date/Place of Issuance: SEPTEMBER 15, 2015/ VSU</div>	<div><div>Signature (Sign inside the box)</div><div>July 12, 2019</div><div>Date Accomplished</div></div>	<div><div>RETO MAE C. COARITO</div></div> <div><div>Right Thumbmark</div></div>												
SUBSCRIBED AND SWORN to before me this JUL 16 2019, affiant exhibiting his/her validly issued government ID as indicated above.														
<div><div>ATTY. RYSAN C. GUINOCOR</div><div>VSU LEGAL OFFICER</div><div>Person Administering Oath</div></div>														