

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	RANCHEZ		16. CITIZENSHIP	☒ Filipino	☐ Dual Citizenship
FIRST NAME	CARLITO		If holder of dual citizenship, please indicate the details.	☐ by birth	☐ by naturalization
MIDDLE NAME	VIDAD			Pls. indicate country:	
3. DATE OF BIRTH (mm/dd/yyyy)	08-14-1957		17. RESIDENTIAL ADDRESS	House/Block/Lot No.	
4. PLACE OF BIRTH	KABACAN, NORTH COTABATO			Street	
5. SEX	☒ Male ☐ Female			Subdivision/Village	
6. CIVIL STATUS	☒ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:			City/Municipality	
7. HEIGHT (m)	1.6		18. PERMANENT ADDRESS	House/Block/Lot No.	
8. WEIGHT (kg)	63			Street	
9. BLOOD TYPE	O			Subdivision/Village	
10. GSIS ID NO.	57 08 14 024 36			City/Municipality	
11. PAG-IBIG ID NO.	17 00 - 0027 - 4919		19. TELEPHONE NO.	House/Block/Lot No.	
12. PHILHEALTH NO.	13 - 0000 73485 - 4			Street	
13. SSS NO.	06 - 1265 056 - 3			Subdivision/Village	
14. TIN NO.	104 - 771 - 439			City/Municipality	
15. AGENCY EMPLOYEE NO.	400 443		20. MOBILE NO.	House/Block/Lot No.	
				Street	
				Subdivision/Village	
				City/Municipality	
			21. E-MAIL ADDRESS (if any)	House/Block/Lot No.	
				Street	
				Subdivision/Village	
				City/Municipality	

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		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	RANCHEZ			
FIRST NAME	PEDRO			
MIDDLE NAME	CALISA			
25. MOTHER'S MAIDEN NAME	VIDAD			
SURNAME	DOLORES			
FIRST NAME	CALDITO			
MIDDLE NAME				

(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	PISAN ELEMENTARY SCHOOL	PRIMARY EDUCATION	1966	1970	N/A	1970	SAUDITORIAN
SECONDARY	UNIVERSITY OF SOUTHERN MINDANAO	HIGH SCHOOL	1970	1974	N/A	1974	FIRST HONORABLE MENTION
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	NISAYAS STATE UNIVERSITY	BS AGRICULTURE PLANT PROTECTION	1981	1983	N/A	1983	N/A
GRADUATE STUDIES	NISAYAS STATE UNIVERSITY	MS ENTOMOLOGY	1989	1993	24	N/A	4/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	04-24-2017
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[illegible]

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

28.	INCLUSIVE DATES				SALARY/JOB/PAY		
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(Continue on separate sheet if necessary)

SIGNATURE		DATE	04-21-2017
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIL SOCIETY / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION

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			
	REORIENTATION OF DEPARTMENT / OFFICE SECRETARIES	11-15-2016	11-15-2016	8	SUPERVISORY	VISAYAS STATE UNIVERSITY
	PRE-RETIREMENT ORIENTATION SEMINAR	09-30-2016	09-30-2016	4	MANAGERIAL	VISAYAS STATE UNIVERSITY
	PROCUREMENT PLANNING WORKSHOP	09-13-2016	09-13-2016	8	TECHNICAL	VISAYAS STATE UNIVERSITY
	SCIENTIFIC FORUM OF THE PHILIPPINE PATHOLOGICAL SOCIETY, INC. - VISAYAS DIVISION	03-13-2003	03-14-2003	16	TECHNICAL	DEPARTMENT OF PEST MANAGEMENT
	ANNUAL CONVENTION OF THE PEST MANAGEMENT COUNCIL OF THE PHILIPPINES, INC.	01-05-2002	01-10-2002	24	TECHNICAL	PEST MANAGEMENT COUNCIL OF THE PHILIPPINES
	13TH REGIONAL SYMPOSIUM ON RESEARCH AND DEVELOPMENT HIGHLIGHTS	07-12-2001	07-13-2001	16	TECHNICAL	VISAYAS STATE COLLEGE OF AGRICULTURE AND LOTE INSTITUTE OF TECHNOLOGY
	21ST ANNUAL CONVENTION OF THE PEST MANAGEMENT COUNCIL OF THE PHILIPPINES, INC.	05-04-1999	05-06-1999	24	TECHNICAL	PEST MANAGEMENT COUNCIL OF THE PHILIPPINES
	INTERNATIONAL CONFERENCE ON APPLIED TROPICAL ECOLOGY	09-08-1998	09-10-1998	24	TECHNICAL	VISAYAS STATE COLLEGE OF AGRICULTURE
	8TH REGIONAL SYMPOSIUM ON RESEARCH AND DEVELOPMENT HIGHLIGHTS	07-03-1996	07-04-1996	24	TECHNICAL	VISAYAS STATE COLLEGE OF AGRICULTURE
	ENVIRONMENTAL IMPACT ASSESSMENT	06-04-1993	06-02-1993	80	TECHNICAL	UNIVERSITY OF THE PHILIPPINES AT LOS BAÑOS AND
	SUMMER ORIENTATION COURSE ON ENVIRONMENTAL STUDIES	04-06-1992	01-29-1992	352	MANAGERIAL	VISAYAS STATE COLLEGE OF AGRICULTURE
	CONCEPTUALIZATION OF INTEGRATED PEST MANAGEMENT	08-14-1989	08-15-1989	16	TECHNICAL	DEPARTMENT OF PEST MANAGEMENT

(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)
	MUSHROOM CULTURE		LOYALTY AWARD (15 YEARS) - 09-30-2016		ALUMNUS - PI OMICRON
	GARDENING/PLANT PROPAGATION				FRATERNITY - USM
	COMPUTER + PHOTOGRAPHY		BEST SCIENCE RESEARCH ASSISTANT AWARD		CHAPTER
	ENVIRONMENTAL IMPACT ASSESSMENT		(08-10-2005) FROM THE VISAYAS		
	COOKING		STATE UNIVERSITY		
	RESTRAINING SMALL/LARGE RUMINANTS/DEHS ADMINISTRATION				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	04-24-2017
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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	CEL. NO.
DR. DINAH M. ESPINA	DEPARTMENT OF ANIMAL SCIENCE	09173276743
DR. WILTON C. BECTIL	DEPARTMENT OF ANIMAL SCIENCE	09177052058
PAF. MANUEL D. GACUTAN, VA.	DEPARTMENT OF ANIMAL SCIENCE	09176361626

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.



CARLITO B. PANCHEZ
PHOTO

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)

PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: V00443

ID/License/Passport No.: DRIVER'S LICENSE
HM-09-000662

Date/Place of Issuance: 2014-05-01, VISA, DAVAO CITY, LAYTE

Signature (Sign inside the box)

04-24-2017

Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this APR 25 2017, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. RYSN C. GUINDOCOR

Person Administering Oath

NOTARY PUBLIC
UNTIL DECEMBER 31, 2017
PTR 0495819 - DAVAO LAYTE - 1/12/17
IBP 1030924 - TACLOBAN CITY - 12/19/16
MCLE COMP. NO. V-000552-07/20/15
ROLL OF ATTORNEYS NO. 57467