

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 () ☐ 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	OLANA		
FIRST NAME	ROCHELLE	NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	CAGADAS		
3. DATE OF BIRTH (mm/dd/yyyy)	06/29/1993	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	ST. BERNARD, SOUTHERN 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 GABAS Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province ZIP CODE 6521
7. HEIGHT (m)	1.61	18. PERMANENT ADDRESS	House/Block/Lot No. Street GABAS Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province ZIP CODE 6521
8. WEIGHT (kg)	68	19. TELEPHONE NO.	N/A
9. BLOOD TYPE	"O"	20. MOBILE NO.	09353418131
10. G SIS ID NO.	2005804535	21. E-MAIL ADDRESS (if any)	rochelle.olana@vsu.edu.ph
11. PAG-IBIG ID NO.	121273884787		
12. PHILHEALTH NO.	130255595416		
13. SSS NO.	N/A		
14. TIN NO.	465340181		
15. AGENCY EMPLOYEE NO.	V01204		

II. FAMILY BACKGROUND


22. SPOUSE'S SURNAME	OLANA	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	KENNY ORIEL	KECHEL MORIAH C. OLANA	02/12/2022
MIDDLE NAME	ARANAS	N/A	N/A
OCCUPATION	GOVERNMENT EMPLOYEE	N/A	N/A
EMPLOYER/BUSINESS NAME	VISAYAS STATE UNIVERSITY	N/A	N/A
BUSINESS ADDRESS	GABAS, BAYBAY CITY, LEYTE	N/A	N/A
TELEPHONE NO.	(053) 565 0600	N/A	N/A
24. FATHER'S SURNAME	CAGADAS	N/A	N/A
FIRST NAME	RODRIGO	N/A	N/A
MIDDLE NAME	VANZUELA	N/A	N/A
25. MOTHER'S MAIDEN NAME		N/A	N/A
SURNAME	BERNABE	N/A	N/A
FIRST NAME	LUZVIMINDA	N/A	N/A
MIDDLE NAME	MENCIDE		

(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	SAINT BERNARD CENTRAL SCHOOL	N/A	2000	2006	N/A	2006	WITH HONOR
SECONDARY	SAN JUAN NATIONAL HIGH SCHOOL	N/A	2006	2010	N/A	2010	WITH HONOR
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 AGRICULTURE MAJOR IN PLANT PROTECTION (PLANT PATHOLOGY)	2010	2014	N/A	2014	PHILIPPINE AGRICULTURE AND RESOURCES RESEARCH FOUNDATION INCORPORATED- CUM LAUDE
GRADUATE STUDIES	UNIVERSITY OF THE PHILIPPINES - LOS BAÑOS	MASTER OF SCIENCE IN PLANT PATHOLOGY	2018	2020	N/A	2020	DOST-ASTHRDP

(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 ELIGIBILITY / DRIVER'S LICENSE BARANGAY	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
				NUMBER	Date of Validity
CSC- HONOR GRADUATE ELIGIBILITY (PRESIDENTIAL DECREE 907)				100108140278	
RA 1080	83.67%	6/24/15	TACLOBAN CITY, LEYTE	0021322	6/29/2021
N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)


V. WORK EXPERIENCE



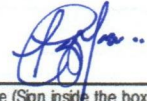
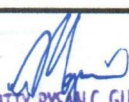
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

(Continue on separate sheet if necessary)

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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			
	CROP'S DISEASES BEYOND BOUNDARIES: KNOW THE TRANSBOUNDARY DISEASES OF 3CS (CASSAVA, CACAO, AND CORN)	06/26/21	06/26/21	3	TECHNICAL	UNIVERSITY OF THE PHILIPPINES - LOS BAÑOS
	MANAGING COMMON DISEASES IN BANANA	05/05/21	05/05/21	3	TECHNICAL	AGRICULTURAL TRAINING INSTITUTE
	STRAW MUSHROOM GROWING: A VIABLE AGRI-ENTERPRISE	05/05/21	05/05/21	3	TECHNICAL	AGRICULTURAL TRAINING INSTITUTE
	CULTIVATING EARTH'S SWEET CROP: THE SWEET POTATO	04/05/21	04/05/21	3	TECHNICAL	AGRICULTURAL TRAINING INSTITUTE
	INTEGRATED PEST MANAGEMENT OF BANANA	04/04/21	04/04/21	3	TECHNICAL	AGRICULTURAL TRAINING INSTITUTE
	CASSAVA SA PAG-ASENSO: THE ROOTS OF PRODUCTIVITY	04/04/21	04/04/21	3	TECHNICAL	AGRICULTURAL TRAINING INSTITUTE
	DNA-BASED RAPID DETECTION KIT FOR BACTERIAL PATHOGENS OF TILAPIA	04/04/21	04/04/21	3	TECHNICAL	CENTRAL LUZON STATE UNIVERSITY
	SMART FARMING: THE FUTURE OF AGRICULTURE PRODUCTION	03/24/21	03/24/21	3	TECHNICAL	CENTRAL LUZON STATE UNIVERSITY
	MANAGEMENT OF ONION ARMYWORM	03/09/21	03/09/21	3	TECHNICAL	BUREAU OF AGRICULTURAL RESEARCH
	TRACKING DOWN THE INVISIBLE KILLER- MOLECULAR TOOLS TO DETECT AND QUANTIFY GRAPEVINE	03/06/21	03/06/21	3	TECHNICAL	UNIVERSITY OF THE PHILIPPINES - LOS BAÑOS
	AGRICULTURE INNOVATIONS: EMBRACING IMPACTS OF CHANGE IN AGRICULTURE AND FOOD SECURITY	03/03/21	03/03/21	3	TECHNICAL	UNIVERSITY OF THE PHILIPPINES - LOS BAÑOS
	A BRIEF OVERVIEW OF THE WORLD VEG PEPPER DISEASE RESISTANCE RESEARCH PROGRAM	02/17/21	02/17/21	3	TECHNICAL	CENTRAL LUZON STATE UNIVERSITY
	GETTING TO KNOW MORE ABOUT AQUAPONICS	02/17/21	02/17/21	3	TECHNICAL	CENTRAL LUZON STATE UNIVERSITY
	THE BUZZING BEEZNESS	02/16/21	02/16/21	3	TECHNICAL	UNIVERSITY OF THE PHILIPPINES - LOS BAÑOS
	GROWING RICE ORGANICALLY	02/11/21	02/11/21	3	TECHNICAL	AGRICULTURAL TRAINING INSTITUTE
	BLOOMS IN MY LIFE	02/11/21	02/11/21	3	TECHNICAL	UNIVERSITY OF THE PHILIPPINES - LOS BAÑOS
	BROILER AND LAYER PRODUCTION	02/10/21	02/10/21	3	TECHNICAL	UNIVERSITY OF THE PHILIPPINES - LOS BAÑOS
	THE CHEESINESS OF DAIRY BUSINESS	02/04/21	02/04/21	3	TECHNICAL	UNIVERSITY OF THE PHILIPPINES - LOS BAÑOS
	WRITING A LITERATURE REVIEW: SOME GUIDES AND ADVICE	02/04/21	02/04/21	3	TECHNICAL	UNIVERSITY OF THE PHILIPPINES - LOS BAÑOS
	MANOK NG BAYAN	02/02/21	02/02/21	3	TECHNICAL	UNIVERSITY OF THE PHILIPPINES - LOS BAÑOS
	WRITING A LITERATURE REVIEW: SOME GUIDES AND ADVICE	02/01/21	02/01/21	3	TECHNICAL	UNIVERSITY OF THE PHILIPPINES - LOS BAÑOS
	FY 2018 NATIONAL ORGANIC AGRICULTURE PLANS AND BUDGET PROPOSAL PREPARATION WORKSHOP	01/16/17	01/20/17	40	TECHNICAL	DEPARTMENT OF AGRICULTURE
	ORGANIC AGRICULTURE FY 2016 YEAR-END ASSESSMENT AND FY 2018 PLANNING WORKSHOP	12/12/16	12/16/16	40	TECHNICAL	DEPARTMENT OF AGRICULTURE
	SECOND EASTERN VISAYAS ORGANIC AGRICULTURE CONGRESS	11/10/16	11/11/16	16	TECHNICAL	DEPARTMENT OF AGRICULTURE
	FINALIZATION OF THE FY 2017 BUDGET EXECUTION DOCUMENTS (BEDS) 1, 2, 3 OF THE NATIONAL RICE, CORN AND ORGANIC AGRICULTURE PROGRAMS	10/24/16	10/28/16	40	TECHNICAL	DEPARTMENT OF AGRICULTURE
	REGIONAL GOOD AGRICULTURAL PRACTICES TEAM TRAINING AND WORKSHOP FOR REGION VIII	10/04/16	10/07/16	32	TECHNICAL	DEPARTMENT OF AGRICULTURE
	ORGANIC AGRICULTURE TECHNICAL COMMITTEE MEETING CUM WORKSHOP	09/26/16	09/30/16	40	TECHNICAL	DEPARTMENT OF AGRICULTURE
	ORGANIC AGRICULTURE 1ST QUARTER CY 2016 PHYSICAL AND FINANCIAL PERFORMANCE ASSESSMENT WORKSHOP	04/20/16	04/22/16	24	TECHNICAL	DEPARTMENT OF AGRICULTURE
	FY 2017 PLAN AND BUDGET PROPOSAL TECHNICAL REVIEW AND WORKSHOP	02/29/16	03/04/16	40	TECHNICAL	DEPARTMENT OF AGRICULTURE
	ORIENTATION OF THE PROGRAM IMPLEMENTERS OF THE INDIGENOUS PEOPLES (IPS) PROGRAM DEVELOPMENT AND BEST PRACTICES IN BUKIDNON	02/21/16	02/24/16	32	TECHNICAL	DEPARTMENT OF AGRICULTURE
	NATIONAL ORGANIC AGRICULTURE PROGRAM PLANNING AND BUDGET WORKSHOP	02/03/16	02/05/16	24	TECHNICAL	DEPARTMENT OF AGRICULTURE
(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 LITERATE		N/A		PHILIPPINE ASSOCIATION OF AGRICULTURISTS, INC.	
	GOOD IN COMMUNICATION SKILLS		N/A		PLANT PROTECTION MAJORS ASSOCIATION	
	READING PLANT PROTECTION RELATED BOOKS AND JOURNALS		N/A		ASSOCIATION OF FRESHMEN AND SOPHOMORE AGRICULTURE STUDENTS	
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	October 15, 2023	
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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)?		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div></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><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div></div> <div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div><div>Date Filed: _____</div><div>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><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div></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><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div></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><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div></div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details: _____</div></div></div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?		<div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, give details (country): _____</div></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><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify: _____</div></div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify ID No: _____</div></div><div><div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div><div>If YES, please specify ID No: _____</div></div></div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)														
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL./CEL. NO.</td></tr><tr><td>CARLOS S. DE LA CRUZ</td><td>TACLOBAN CITY, LEYTE</td><td>09185074623</td></tr><tr><td>ROBELYN TO. PIAMONTE</td><td>VISAYAS STATE UNIVERSITY</td><td>+63 53 54565 0600</td></tr><tr><td>EL VIRA L. OCLARIT</td><td>VISAYAS STATE UNIVERSITY</td><td>+63 53 54565 0600</td></tr></table>			NAME	ADDRESS	TEL./CEL. NO.	CARLOS S. DE LA CRUZ	TACLOBAN CITY, LEYTE	09185074623	ROBELYN TO. PIAMONTE	VISAYAS STATE UNIVERSITY	+63 53 54565 0600	EL VIRA L. OCLARIT	VISAYAS STATE UNIVERSITY	+63 53 54565 0600
NAME	ADDRESS	TEL./CEL. NO.												
CARLOS S. DE LA CRUZ	TACLOBAN CITY, LEYTE	09185074623												
ROBELYN TO. PIAMONTE	VISAYAS STATE UNIVERSITY	+63 53 54565 0600												
EL VIRA L. OCLARIT	VISAYAS STATE UNIVERSITY	+63 53 54565 0600												
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><div>ROCHELLE C. OLANA</div></div> <div><div>Right Thumbmark</div></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: VISAYAS STATE UNIVERSITY</div> <div>ID/License/Passport No.: V01204</div> <div>Date/Place of Issuance: 05/24/21</div>	<div><div>Signature (Sign inside the box)</div><div>October 15, 2023</div><div>Date Accomplished</div></div>													
SUBSCRIBED AND SWORN to before me this 28 DEC 2023, affiant exhibiting his/her validly issued government ID as indicated above.														
<div><div>ATTY. RYAN C. GUINOCOR</div><div>VSU Chief Legal Officer</div><div>Person Administering Oath</div></div>														


WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

- Duration: August 2021 – July 2022
- Position: Instructor I
- Name of Office/Unit: PhilRootcrops
- Immediate Supervisor: Marlon M. Tambis
- Name of Agency/Organization and Location: Visayas State University, Baybay City, Leyte
- List of Accomplishments and Contributions (if any)
 - Taught assigned subjects and performs other teaching related functions
 - Performed research and/or extension functions
 - Performed functions relative to committee memberships
- Summary of Actual Duties
 - Teaches assigned subjects and performs other teaching related functions
 - Performs research and/or extension functions
 - Performs functions relative to committee memberships and other ad hoc assignments including related to quality assurance and other accreditation functions

- Duration: August 2022– November 2023
- Position: Instructor I
- Name of Office/Unit: Department of Pest Management
- Immediate Supervisors: Elvira L. Oclarit and Robelyn T. Piamonte
- Name of Agency/Organization and Location: Visayas State University, Baybay City, Leyte
- List of Accomplishments and Contributions (if any)
 - Taught assigned subjects and performs other teaching related functions
 - Performed research and/or extension functions
 - Performed functions relative to committee memberships
- Summary of Actual Duties
 - Teaches assigned subjects and performs other teaching related functions
 - Performs research and/or extension functions
 - Performs functions relative to committee memberships and other ad hoc assignments including related to quality assurance and other accreditation functions


 ROCHELLE C. OLANA
 (Signature over Printed Name
 of Employee/Applicant)
 Date: October 15, 2023