

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 (Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	BORNIA		
FIRST NAME	NELITA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	CUYOS		
3. DATE OF BIRTH (mm/dd/yyyy)	9/1/1967	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization P/s. indicate country:
4. PLACE OF BIRTH	Manililid Javier, 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 Subdivision/Village Barangay City/Municipality Province
7. HEIGHT (m)	1.44 m	ZIP CODE	6521
8. WEIGHT (kg)	53.9 kg	18. PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
9. BLOOD TYPE	"O"	ZIP CODE	6521
10. GSIS ID NO.	B67T1NPC017	19. TELEPHONE NO.	N/A
11. PAG-IBIG ID NO.	1700-0028-4021	20. MOBILE NO.	09265130803
12. PHILHEALTH NO.	13-000015276-6	21. E-MAIL ADDRESS (if any)	nbornias@yahoo.com
13. SSS NO.	N/A		
14. TIN NO.	915-327-356		
15. AGENCY EMPLOYEE NO.	V00660		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Bornias	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)	
FIRST NAME	Ricardo	NAME EXTENSION (JR., SR)	Richienel C. Bornias	3/26/2004
MIDDLE NAME	Bulahan		Renelyn C. Bornias	8/24/2009
OCCUPATION	Laborer			
EMPLOYER/BUSINESS NAME	OVPREI, VSU			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	Cuyos			
FIRST NAME	Cresenciano	Sr.		
MIDDLE NAME	Arcelo			
25. MOTHER'S MAIDEN NAME				
SURNAME	Pepito			
FIRST NAME	Norberta			
MIDDLE NAME	Bughao			

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	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	Manililid Elementary School	PRIMARY EDUCATION	1973	1979	graduated	1979	NA
SECONDARY	Abuyog Academy	SECONDARY EDUCATION	1979	1983	graduated	1983	NA
VOCATIONAL / TRADE COURSE							
COLLEGE	Visayas State College of Agriculture (VISCA) VSU	Bachelor of Science in Agriculture major in Horticulture	1985	1992	graduated	1992	NA
GRADUATE STUDIES	Visayas State University (VSU)	Master of Science in Horticulture	1993		37		



#### IV. CIVIL SERVICE ELIGIBILITY

[illegible]

## V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)			
SIGNATURE	<i>[Signature]</i>	DATE	6-11-2021
			CS FORM 212 (Revised 2017), Page 2 of 4







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>Asst. Prof. Gloria E. Bancale</td><td>Dept. of Horticulture, VSU</td><td></td></tr><tr><td>Asst. Prof. Roden D. Troyo</td><td>Dept. of Horticulture, VSU</td><td></td></tr><tr><td>Dr. Catherine C. Arradaza</td><td>Dept. of Horticulture, VSU</td><td></td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	Asst. Prof. Gloria E. Bancale	Dept. of Horticulture, VSU		Asst. Prof. Roden D. Troyo	Dept. of Horticulture, VSU		Dr. Catherine C. Arradaza	Dept. of Horticulture, VSU	
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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.													
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: <b>PhilHealth ID</b> ID/License/Passport No.: <b>13-000015276-6</b> Date/Place of Issuance: <b>Baybay City, Leyte</b>	<table><tr><td>Signature (Sign inside the box)</td></tr><tr><td>6-11-2021</td></tr><tr><td>Date Accomplished</td></tr></table>	Signature (Sign inside the box)	6-11-2021	Date Accomplished									
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NELITA C. BORNIA



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