

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	COME		
FIRST NAME	RENEZITA		NAME EXTENSION (JR., SR)
MIDDLE NAME	SALES		
3. DATE OF BIRTH (mm/dd/yyyy)	2/8/1977	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	STA. MESA, MANILA	If holder of dual citizenship, please indicate the details.	<input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		Philippines
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	APARTMENT 27 KILBOURNE House/Block/Lot No. Street VISCA PANGASUGAN Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.53	ZIP CODE	6521-A
8. WEIGHT (kg)	54	18. PERMANENT ADDRESS	1351 DEL ROSARIO House/Block/Lot No. Street Subdivision/Village POBLACION DISTRICT 8 BURAUEN LEYTE City/Municipality Province
9. BLOOD TYPE	B+	ZIP CODE	6516
10. GSIS ID NO.	77020800723	19. TELEPHONE NO.	053-563-7552
11. PAG-IBIG ID NO.	1700-0028-9875	20. MOBILE NO.	09988630524
12. PHILHEALTH NO.	13-000054101-0	21. E-MAIL ADDRESS (if any)	rscome@vsu.edu.ph
13. SSS NO.	04-0912472-3		
14. TIN NO.	205-662-803-000		
15. AGENCY EMPLOYEE NO.	V00160		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	COME		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	WARREN	NAME EXTENSION (JR., SR)	JOHNA LOUREN S. COME	4/6/2005
MIDDLE NAME	DE VEYRA		JUANCHO EZEKIEL S. COME	4/8/2013
OCCUPATION	ASSISTANT PROFESSOR			
EMPLOYER/BUSINESS NAME	VISAYAS STATE UNIVERSITY			
BUSINESS ADDRESS	VISCA, BAYBAY CITY, LEYTE			
TELEPHONE NO.	NONE			
24. FATHER'S SURNAME	SALES (DECEASED)			
FIRST NAME	RENATO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	DELGADO			
25. MOTHER'S MAIDEN NAME	FERNANDEZ			
SURNAME	SALES			
FIRST NAME	FELECIDAD			
MIDDLE NAME	ROSARIO			

(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	ISABELO BAUYON CALINGASAN MEMORIAL INSTITUTION	ELEMENTARY	1983	1989	GRADUATED	1989	NONE
SECONDARY	SAINT JOHN ACADEMY	SECONDARY	1989	1993	GRADUATED	1993	NONE
VOCATIONAL / TRADE COURSE	NONE	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	UNIVERSITY OF THE PHILIPPINES LOS BANOS	FOREST RANGER CERTIFICATE AND BS FORESTRY	1993	1998	GRADUATED	1998	UP STFAP
GRADUATE STUDIES	UNIVERSITY OF THE PHILIPPINES LOS BANOS	MS FORESTRY	2000	2005	GRADUATED	2005	UP PRESIDENTIAL
GRADUATE STUDIES	UNIVERSITY OF GOETTINGEN, GERMANY	PHD IN FOREST SCIENCES AND FOREST ECOLOGY	2006	2010	GRADUATED	2010	DAAD/CUM LAUDE

(Continue on separate sheet if necessary)

SIGNATURE		DATE	November 15, 2019
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IV. CIVIL SERVICE ELIGIBILITY						
27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	FORESTERS LICENSURE EXAM	79.15	JUNE 20-21, 2000	MLQU, MANILA	7306	6/25/2000

(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.

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[illegible]

(Continue on separate sheet if necessary)

mti

DATE	NOVEMBER 15, 2019
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23.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	NONE	N/A	N/A	N/A	N/A










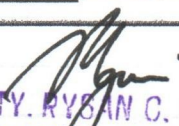
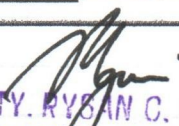
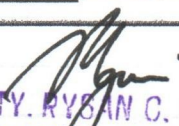
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
DRIVING, CULINARY	NONE	PHI DELTA HONOR SOCIETY
		MUSSAENDA HONOR SORORITY
		UP ALUMNI ASSOCIATION
		SOCIETY OF FILIPINO FORESTERS

SIGNATURE		DATE	NOVEMBER 15, 2019
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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)?	<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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: <u>RESIGNATION FROM WORK AS CHEMICAL ANALYST</u>																
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)																	
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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.																	
<table><tr><td colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID:</td><td>V00160</td></tr><tr><td>ID/License/Passport No.:</td><td>H12-16-002695</td></tr><tr><td>Date/Place of Issuance:</td><td>LTO, BAYBAY CITY</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:	V00160	ID/License/Passport No.:	H12-16-002695	Date/Place of Issuance:	LTO, BAYBAY CITY	<table><tr><td colspan="2"></td></tr><tr><td colspan="2">Signature (Sign inside the box)</td></tr><tr><td colspan="2">NOVEMBER 15, 2019</td></tr><tr><td colspan="2">Date Accomplished</td></tr></table>			Signature (Sign inside the box)		NOVEMBER 15, 2019		Date Accomplished	
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SUBSCRIBED AND SWORN to before me this <u>20 NOV 2019</u> , affiant exhibiting his/her validly issued government ID as indicated above.																	
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