

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	LAMBERT		
FIRST NAME	ANTHONY	NAME EXTENSION (JR., SR)	
MIDDLE NAME	PASCUAL		
3. DATE OF BIRTH (mm/dd/yyyy)	MARCH 26, 1981	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	QUEZON CITY	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input 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	APARTMENT 52 House/Block/Lot No. Street VISAYAS STATE UNIVERSITY PANGASUGAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.8 m	ZIP CODE	6521
8. WEIGHT (kg)	105 kg	18. PERMANENT ADDRESS	APARTMENT 52 House/Block/Lot No. Street VISAYAS STATE UNIVERSITY PANGASUGAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
9. BLOOD TYPE	A+	ZIP CODE	6521
10. GSIS ID NO.	2005462271	19. TELEPHONE NO.	(053) 563 7024
11. PAG-IBIG ID NO.	002197585507	20. MOBILE NO.	09176309716 / 09190616898
12. PHILHEALTH NO.	190895776479	21. E-MAIL ADDRESS (if any)	lambertapl@yahoo.com
13. SSS NO.	0622438571		
14. TIN NO.	920852844		
15. AGENCY EMPLOYEE NO.	V01087		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	LAMBERT	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	MA. JESUSA CORAZON	ABIEGAIL M. LAMBERT	12/26/2002
MIDDLE NAME	MORALDE	ANTHONY DARYL M. LAMBERT	2/10/2012
OCCUPATION	INSTRUCTOR		
EMPLOYER/BUSINESS NAME	VISAYAS STATE UNIVERSITY		
BUSINESS ADDRESS	BAYBAY CITY LEYTE		
TELEPHONE NO.	(053) 563 7027		
24. FATHER'S SURNAME	LAMBERT		
FIRST NAME	ALOYSIUS GLENROY		
MIDDLE NAME	MIRAL		
25. MOTHER'S MAIDEN NAME			
SURNAME	PASCUAL		
FIRST NAME	NELEN		
MIDDLE NAME	PLEÑOS		

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	VISCA FOUNDATION ELEMENTARY SCHOOL	PRIMARY EDUCATION	1988	1994	NA	NA	NA
SECONDARY	VISCA LABORATORY HIGH SCHOOL	SECONDARY EDUCATION	1994	1998	NA	NA	NA
VOCATIONAL / TRADE COURSE	NA	NA	NA	NA	NA	NA	NA
COLLEGE	VISAYAS STATE UNIVERSITY	BS AGRIBUSINESS MAJOR BUSINESS MANAGEMENT	1998	2002	NA	2002	CUMLAUDE
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF MANAGEMENT MAJOR BUSINESS MANAGEMENT	2016	2018	NA	2018	NA

SIGNATURE	DATE	February 8, 2023
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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
	CERTIFICATE OF ELIGIBILITY (HONOR STUDENT)		04-02-2002		10080213	
	PROFESSIONAL DRIVER'S LICENSE		03-26-2019	LTO BAYBAY CITY	H03-98-030007	03-26-2024

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	Feb 8, 2023
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

[illegible]

(Continue on separate sheet if necessary)

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

[illegible]





(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	Feb 8, 2013
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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><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><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</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 checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details: Finish Contract _____</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></td><td></td><td></td></tr><tr><td>ZALDY SALUDO</td><td>DISTRICT MANAGER PFIZER INC.</td><td>,0917854478</td></tr><tr><td>ED BELARMINO</td><td>DISTRICT MANAGER MULTICARE</td><td>,09228647892</td></tr><tr><td>DR. JOSE L. BACUSMO</td><td>BAYBAY CITY COUNCILOR</td><td>,09686906880</td></tr></table>						ZALDY SALUDO	DISTRICT MANAGER PFIZER INC.	,0917854478	ED BELARMINO	DISTRICT MANAGER MULTICARE	,09228647892	DR. JOSE L. BACUSMO	BAYBAY CITY COUNCILOR	,09686906880
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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.		<div></div> <div>PHOTO</div> <div></div> <div>Right Thumbmark</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: DRIVER'S LICENSE</div> <div>ID/License/Passport No.: H03-98-030007</div> <div>Date/Place of Issuance: 03/26/2019 LTO BAYBAY CITY</div>	<div></div> <div>Signature (Sign inside the box)</div> <div>_____</div> <div>Date Accomplished</div>													
SUBSCRIBED AND SWORN to before me this 13 MAR 2023, affiant exhibiting his/her validly issued government ID as indicated above.														
<div></div> <div>ATTY. RYAN C. GUINOCOR VCL, Chief Legal Officer</div> <div>Person Administering Oath</div>														