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) 2. SURNAME OLANA NAME EXTENSION (JR., SR) FIRST NAME KENNY ORIEL MIDDLE NAME ARANAS 3. DATE OF BIRTH JULY 16, 1991 16. CITIZENSHIP Filipino (mm/dd/yyyy) Dual Citizenship □ by birth by naturalization 4. PLACE OF BIRTH POBLACION, IMPASUGONG, BUKIDNON If holder of dual citizenship Pls. indicate country: please indicate the details 5. SEX ☐ Female ✓ Male T ✓ Single ☐ Married 17. RESIDENTIAL ADDRESS N/A N/A 6 CIVIL STATUS House/Block/Lot No. Street ☐ Widowed ☐ Separated Gabas Other/s: Subdivision/Village Barangay Baybay City Leyte 7. HEIGHT (m) 1.65 City/Municipality Province 8. WEIGHT (kg) 58.9 ZIP CODE 18. PERMANENT ADDRESS Zone 2 Olana Street 9. BLOOD TYPE 0 House/Block/Lot No Street Poblacion 10. GSIS ID NO N/A Subdivision/Village Barangay Bukidnon Impasugong 11. PAG-IBIG ID NO N/A City/Municipality Province 12. PHILHEALTH NO. 08-026496631-4 ZIP CODE 8702 13. SSS NO. N/A 19. TELEPHONE NO. N/A 14 TIN NO 491-762-056 20. MOBILE NO. +639214611631 / +639364475133 15. AGENCY EMPLOYEE NO ON THE PROCESS 21. E-MAIL ADDRESS (if any) kenny.olana@vsu.edu.ph FAMILY BACKGROUND 22. SPOUSE'S SURNAME N/A 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME N/A N/A MIDDLE NAME N/A N/A OCCUPATION N/A N/A EMPLOYER/BUSINESS NAME N/A N/A **BUSINESS ADDRESS** N/A N/A TELEPHONE NO N/A N/A 24. FATHER'S SURNAME OLANA N/A FIRST NAME **REYNALDO** N/A MIDDLE NAME **DELA CRUZ** N/A 25. MOTHER'S MAIDEN NAME N/A SURNAME **ARANAS** FIRST NAME MARINA N/A MIDDLE NAME TAÑEDO (Continue on separate sheet if necessary) SCHOLARSHIP 26 HIGHEST LEVEL PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR ACADEMIC LEVEL UNITS EARNED (Write in full) GRADUATED (Write in full) HONORS (if not graduated) RECEIVED From To ELEMENTARY IMPASUGONG CENTRAL ELEMENTARY SCHOOL BASIC EDUCATION 06/01/1999 03/30/2004 N/A 2004 3RD SECONDARY IMPASUGONG NATIONAL HIGH SCHOOL GENERAL EDUCATION 06/01/2004 03/30/2008 2008 Honorable VOCATIONAL / TRADE COURSE COLLEGE **VISAYAS STATE UNIVERSITY** DOCTOR OF VETERINARY MEDICINE 06/02/2012 04/16/2016 CHED, DAAD **GRADUATE STUDIES** UNIVERSITY OF THE PHILIPPINES LOS BAÑOS MASTER IN VETERINARY EPIDEMIOLOGY 08/02/2017 06/22/2019 N/A 2019 SEARCA SIGNATURE DATE August 19, 2019

CIVIL SERVICE ELIGIBILITY CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER DATING PATING			RATING	DATE OF				LICENSE (if applicable)	
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE CSE-PPT PRC		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFE	RMENT	NUMBER	Date of Validity	
		84.8	MAY 27, 2016	TACLOBAN	CITY, LEYT	Es son (4.0)	312564	2016-20	
		82.0	01/08/2016	CAGAYAN DE ORO CITY, MISA		ORIENTAL	8929	2019-2022	
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	EXPERIENCE vate employment	Start from your rece		ntinue on separate shee	t if necessary) be indicated in the attach	ed Work Ex	perience shee	t.	
INCLUSIVE DATES (mm/dd/yyyy) POSITION (Write in full/Do no			DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVIC (Y/ N)	
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VOLUNTÂRY WORK OR INVOLVEMENT				ORGANIZATIO	V/S		
NAME & ADDRESS OF ORGANIZATION (Write in full)			IVE DATES (dd/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK	
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LEARNING AND DEVELOPMENT (L&D)		TO REAL PROPERTY AND ADDRESS OF THE PARTY AND	AND DESCRIPTION OF STREET OF STREET, S		Market Commence		
t from the most recent L&D training program and includ	e only the relevant L&D/training taken for	r the last five (5) yea	rs for Division Chi	ief/Executive/Manage	rial positions)		
TITLE OF LEARNING AND DEVELOPMENT INTE	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS		INCLUSIVE DATES OF ATTENDANCE		Type of LD (Managerial/	CONDUCTED/ SPONSORED BY	
(Write in full)		(mm	/dd/yyyy)	NUMBER OF HOURS	Supervisory/ Technical/etc)	(Write in full)	
Public Speaking Co	urse	06/03/2019	06/08/2019	15 hours	Technical	Office of Initiatives in Culture and the Arts, UPLE	
ANSC 299 Graduate Seminar "Genetic Imp		04/05/2019	04/05/2019	2 hours	Technical		
3rd Pan-Asian One Health Internation		03/26/2019	03/28/2019	24 hours	Technical	Institute of Animal Science, UPLB University of California-Davis, University of the	
University of the Philippines-Kyoto Univers			01/29/2019	_		Philippines Kyoto University	
	51011 6VED 5/31 11	01/29/2019	+	8 hours	Technical	Southeast Asian Regional Center for Graduat	
Training on Data Analysis and Ex	perimental Design	01/07/2019	01/11/2019	40 hours	Technical	Studies and Research in Agriculture Southeast Asian Regional Center for Graduat	
4th Regional SEARCA Alumni Asse	ociation Conference	10/08/2019	10/09/2019	16 hours	Technical	Studies and Research in Agriculture	
4th GIS Training for Be	eginners	03/15/2019	03/16/2019	16 hours	Technical	Geographic Innovations for Development Soluti Inc.	
85th Philippine Veterinary Medical Association Conference	Annual Convention and Scientific	02/14/2018	02/16/2019	24 hours	Technical	Philippine Veterinary Medical Association	
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		(Continue on separ	ate sheet if necess	sary)			
VIII. OTHER INFORMATION		NON-ACADEMIC DI	STINCTIONS / REC	COGNITION		MEMBERSHIP IN ASSOCIATION/ORGANIZAT	
31. SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33. (Write in full)	
N/A	3	N/A				Philippine Medical Veterinary Associat	
	1 h.2 m	Philippine Network of Microbial Collect					
s were not steple	T = 30/ E = 1				Philippine Society of Lactic Acid Bacte		
December 1990 to the second se					VSU Alumni Association		
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					SEARCA Alumni Association		
	N. A.					SEARCA AIUIIIII ASSOCIATION	
		(Continue on sep	arata ablant if an	seary)			

34.	Are you related by consanguinity or affinity to the appointing on chief of bureau or office or to the person who has implicate s	or recommending authority, or to the		1	
	Bureau or Department where you will be apppointed,	supervision over you in the onition		*	
	a. within the third degree?		☐ YES ☑ NO		
	b. within the fourth degree (for Local Government Unit - Care	☐ YES ☑ NO			
			If YES, give details:	N/A	
-				14// 1	
35.	a. Have you ever been found guilty of any administrative offer	☐ YES ☑ NO			
			If YES, give details:	N/A	
				1071	
	b. Have you been criminally charged before any court?	. Have you been criminally charged before any court?			
			If YES, give details:	NI/A	
			Date Filed: Status of Case/s:	N/A N/A	
	i to the formation of an	w law doorgo ordinance or regulation by	YES V NO		
36.	any court or tribunal?	u ever been convicted of any crime or violation of any law, decree, ordinance or regulation by t or tribunal?			
	any court of an analysis and a	If YES, give details:	N/A		
	The state of the s	E-Union mades, resignation			
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, en	☐ YES ☑ NO If YES, give details:			
	(abolition) in the public or private sector?	327271 - 13 - 19 - 1	N/A		
38.	a. Have you ever been a candidate in a national or local elec-	ction held within the last year (except	☐ YES ☑ NO		
	Barangay election)?	mental procesore errorence	If YES, give details:	N/A	
	b. Have you resigned from the government service during the	☐ YES ☑ NO			
	election to promote/actively campaign for a national or local	candidate?	If YES, give details:	N/A	
39.	Have you acquired the status of an immigrant or permanent	resident of another country?	☐ YES ☑ NO		
			If YES, give details (country):	no patengal	
			prestrance of the present of	N/A	
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag		od bne pater in a form 4 pater base is	The Proposition of the Mark	
	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?		☐ YES ☐ NO If YES, please specify:	Higaonon	
b.	Are you a person with disability?		YES NO	riigaoriori	
			If YES, please specify ID No:	N/A	
C.	Are you a solo parent?		☐ YES ☑ NO	A1/4	
			If YES, please specify ID No:	N/A	
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /	(appointee)			
	NAME	ADDRESS	TEL. NO.		
	EUGENE B. LAÑADA	Visca, Baybay City, Leyte	N/A	0	
	ANA MARQUIZA M. QUILICOT	Bilar, Bohol	N/A		
	BETSIE KRUEGER			3	
10		Los Baños, Laguna	N/A		
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine			ANA, KENNY ORIEL	
	Philippines. I authorize the agency head/authorized representations of pertine		Topublic of the	ARANAS	
	agree that any misrepresentation made in this docur			РНОТО	
	administrative/criminal case/s against me.				
0	Sovernment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)				
P	PLEASE INDICATE ID Number and Date of Issuance	1 2.4			
G	overnment Issued ID: PRC	The day	yan		
10	D/License/Passport No.: 8929	iox)			
D	ate/Place of Issuance: Cagayan De Oro City	0.00			
-		Date Accomplished		Right Thumbmark	
	SUBSCRIBED AND SWORN to before me this	AUG 2019 , affiant exhib	iting his/her validly issued government	ID as indicated above.	
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		ATTY: RYS O C. GUINOC	OR		
		VSUI EGA VAEFICEA			
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WORK EXPERIENCE SHEET

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

- 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 starting with the most recent/present employment
- Duration: September 04, 2016 May 30, 2017
- Position: Part-time Instructor
- Name of Office/Unit: College of Veterinary Medicine
- Immediate Supervisor: Eugene B. Lañada
- Name of Agency/Organization and Location: Visayas State University
 - List of Accomplishments and Contributions (if any)
 - Summary of Actual Duties
 - Responsible for performing teaching students, giving of examinations, computation of grades, and occasional administrative works.

(Signature over Printed Name of Employee/Applicant)

Date: August 06, 2019