## 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. 1 CSID No (Do not fill up. For CSC use only Print legibly. Tick appropriate boxes ( 🔲 and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 2. SURNAME BANSALE NAME EXTENSION (JR., SR) NA FIRST NAME JAY MIDDLE NAME CUSTODIO 3. DATE OF BIRTH FEBRUARY 10, 1987 16. CITIZENSHIP ✓ Filipino Dual Citizenship (mm/dd/yyyy) ✓ by birth by naturalization MACARTHUR, LEYTE 4. PLACE OF BIRTH If holder of dual citizenship, Pls. indicate country: please indicate the details 5. SEX ✓ Male ☐ Female 17. RESIDENTIAL ADDRESS SAN VICENTE STREET, POBLACION DISTRICT 3, MACARTHUR, LEYTE Single ☐ Married 6 CIVIL STATUS House/Block/Lot No. Street ☐ Widowed ☐ Separated Other/s: Subdivision/Village Barangay 7. HEIGHT (m) 5'4 City/Municipality 8. WEIGHT (kg) 62 7IP CODE 6509 SAN VICENTE STREET MACARTHUR LEYTE 18 PERMANENT ADDRESS 9 BLOOD TYPE 0 House/Block/Lot No. 10. GSIS ID NO. 2004146990 Subdivision/Village Barangay 11. PAG-IBIG ID NO. 170000891068 City/Municipality Province 12. PHILHEALTH NO 13-050083909-1 ZIP CODE 6509 0628190813 13. SSS NO. 19. TELEPHONE NO 9489762630 14. TIN NO. 261-643-080 20 MOBILE NO 09489762630 V01155 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) jay.bansale@vsu.edu.ph SPOUSE'S SURNAME NA 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME NA NA NA MIDDLE NAME NA NA NA NA OCCUPATION NA NA EMPLOYER/BUSINESS NAME NA NA NA **BUSINESS ADDRESS** NA NA NA TELEPHONE NO NA NA NA BANSALE 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) **BRAULIO** FIRST NAME MENDE MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME CUSTODIO MA.EVELYN FIRST NAME MIDDLE NAME OLMEDO (Continue on separate sheet if necessary) SCHOLARSHIP/ HIGHEST LEVEL PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE ACADEMIC LEVEL UNITS EARNED GRADUATED (Write in full) (Write in full) HONORS (if not graduated) From To ELEMENTARY MACARTHUR CENTRAL SCHOOL **Elementary Graduate** 1994 GRADUATED 2000 NONE 2000 SECONDARY MACARTHUR NATIONAL HIGH SCHOOL **High School Graduate** GRADUATED 2000 2004 2004 NONE VOCATIONAL / NA NA NA NA NA NA TRADE COURSE COLLEGE LEYTE NORMAL UNIVERSITY BACHELOR OF SECONDARY EDUCATION GRADUATED 2008 NONE 2004 2008 MASTER OF ARTS IN TEACHING SOCIAL **GRADUATE STUDIES** LEYTE NORMAL UNIVERSITY 2011 2016 GRADUATED 2016 NONE SCIENCE SIGNATURE DATE July 15, 2021

| 7. CARE   | ER SERVICE/ RA 1080<br>SPECIAL LAWS/ (  | (BOARD/BAR) UNDER<br>CES/CSEE  | RATING   | DATE OF<br>EXAMINATION /   | PLACE OF EXAMINA   | TION / CONFFI                                 | RMENT                                   | LICENSE (if a              |                                   |
|---|---|--|--|--|--|---|---|----------------------------|-----------------------------------|
| BARANGAY ELIGIBILITY / DRIVER'S LICENSE (If Applicable) |   |  | (IT Applicable)  | CONFERMENT   |  | THE TAIL TO STATE WITH THE BOOK               |   | NUMBER                     | Date of<br>Validity<br>01/10/2020 |
| LICENSURE EAXMINATION FOR TEACHERS                      |   | 83.4   | SEPTMEBER 28,<br>2008  | LEYTE NATIONAL HIGH SCHOOL, TACLOBAN<br>CITY   |  |   | 1019375                                 |                            |                                   |
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| WORK E  | XPERIENCE   |  | (Co  | ntinue on separate sheet   | If necessary)  |   |   |                            |                                   |
|   | ate employment. S   | Start from your recent   | work) Description  | of duties should be  | indicated in the attached  | Work Expe                                     | SALARY/ JOB/ PAY                        |                            |                                   |
|   | (mm/dd/yyyy) POSITION TITLE<br>(Write in full/Do not abbreviate)  |  |  | DEPARTMENT / AG<br>(Write in fu  | MONTHLY<br>SALARY  | GRADE (if applicable) & STEP (Format *00-0*)/ | STATUS OF<br>APPOINTMENT                | GOV'T<br>SERVICI<br>(Y/ N) |                                   |
| ugust 1, 2019   |   | Instructor   | II   | Visayas State  | 28, 276  |   | REG.TEMPORARY                           | YES                        |                                   |
| ept.1, 2011   | July 31, 2019   | Teacher  |  |  | NT OF EDUCATION  | 25 643  |   | REG.PERMANENT              | YES                               |
| une 1, 2009   | Aug. 20, 2011   | Instructor 1   |  | ACLC Co  | 10 000   | 2012)   | Probationary                            | No                         |                                   |
| pril 4, 2008  | April 1, 2009   | Teacher 1  |  | St. Therese Educ   | cational Center of Leyte   | 5000  | / W. C. C. C. C.                        | Probationary               | No                                |
|   |   |  |  | (24) 8323  |  |   | CLEARS                                  |                            |                                   |
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| VI. VOLUNTARY WORK OR INVOLVEMENT I  | N CIVIC / NON-GOVERNMENT / I   | PEOPLE / VOL               | UNTARY OR  | GANIZATION/S       | }   |  |  |
|--|--|----------------------------|--|--------------------|---|--|--|
|  | NAME & ADDRESS OF ORGANIZATION (Write in full)   |                            | INCLUSIVE DATES (mm/dd/yyyy) From To   |                    | POSITION / NATURE OF WORK                   |  |  |
| Visayas State University Fact  | ulty Association   | October 01, 2019           | present  | none               |   | member   |  |
|  | ista rester 1877 e   |                            | 10000000   | A 107 - 10 G - 1   |   |  |  |
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| VII. LEARNING AND DEVELOPMENT (L&D) I<br>Start from the most recent L&D/training program and inclu |  |                            |  | nief Executive/Man | agerial positions)                          |  |  |
| 30. TITLE OF LEARNING AND DEVELOPMENT INTI   | ations that the state of the st |                            | INCLUSIVE DATES OF<br>ATTENDANCE<br>(mm/dd/yyyy)   |                    | Type of LD<br>( Managerial/<br>Supervisory/ | CONDUCTED/ SPONSORED BY (Write in full)  |  |
| 2019 CSSP Extramural Training Seminar For Social   | Science Teachers   | From October 22            | To October 24, 2019  | 24                 | Technical/etc) PATICIPANT                   | University of the Philippines Dilimar  |  |
| TRAINING OF TEACHERS KNOWLEDGE ON CONTEI<br>ANALYSIS   | NT, TEST CONSTRUCTION AND ITEM   | NOV.20                     | NOV.22, 2017   | 24                 | PARTICIPANT                                 | DEPED LEYTE  |  |
| FIRST AID TRAINING FOR TEACHERS  | Ar [1] 1896  | AUG.4                      | AUG.6, 2017  | 8                  | PARTICPANT                                  | MACARTHUR NATIONAL HIGH SCHOOL   |  |
| SEMINAR WORKSHOP ON CREATIVE DRAWING   | Paragales III  | FEB.15                     | FEB.17, 2017   | 8                  | PARTICIPANT                                 | MACARTHUR NATIONAL HIGH SCHOOL   |  |
| Wrieteshop on Preparation of Licensure Examination  Materials                                      | on for Professional Teachers Review  | April 12-23                | April 27, 2021   | 54.0               | PARTICIPANT                                 | Visayas State University   |  |
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| VIII. OTHER INFORMATION  |  | 1                          |  |                    |   |  |  |
| 31. SPECIAL SKILLS and HOBBIES   | 32. NO   | N-ACADEMIC DIST            | INCTIONS / RECO  | GNITION            |   | 33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)   |  |
| WRITING AND READING THE BAYBAYIN   | none   |                            |  |                    |   | none   |  |
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| SIGNATURE  |  | ontinue on separate        | e sheet if necessa   |                    | DATE  | July 15, 2021  |  |
| SIGNATURE  | dole   | sign and no                |  |                    |   | CS FORM 212 (Revised 2017), Page 3   |  |

|        | Are you related by consanguinity or affinity to the appointir chief of bureau or office or to the person who has immedia Bureau or Department where you will be appointed,   |  |                                       | Acres de la constante de la co |  |
|--------|--|--|---------------------------------------|--|--|
|        | a. within the third degree?  | YES NO   |                                       |  |  |
|        | b. within the fourth degree (for Local Government Unit - Ca  | YES NO   |                                       |  |  |
|        | b. within the fourth degree (for Local Government onlt - Ca  | If YES, give details:  |                                       |  |  |
|        |  |  | ii 120, give details.                 |  |  |
| 35.    | a. Have you ever been found guilty of any administrative of  | offense?   | YES NO                                |  |  |
|        |  |  | If YES, give details:                 |  |  |
|        |  |  |                                       |  |  |
|        | b. Have you been criminally charged before any court?  |  | ☐ YES ✓ NO                            |  |  |
|        |  | If YES, give details:  |                                       |  |  |
|        |  | and any department of the second of the seco | Date Filed:                           |  |  |
|        |  |  | Status of Case/s:                     |  |  |
| 36.    | Have you ever been convicted of any crime or violation of  | ☐ YES ✓ NO   |                                       |  |  |
|        | any court or tribunal?   | If YES, give details:  |                                       |  |  |
|        |  |  |                                       |  |  |
| 37.    | Have you ever been separated from the service in any of retirement, dropped from the rolls, dismissal, termination,  |  | ☐ YES ☑ NO If YES, give details:      | 0  |  |
|        | (abolition) in the public or private sector?   | ii i LO, give udialis.   |                                       |  |  |
| 38.    | a. Have you ever been a candidate in a national or local e   | ☐ YES ☑  | NO                                    |  |  |
|        | Barangay election)?  | If YES, give details:  |                                       |  |  |
|        | b. Have you resigned from the government service during  | YES  | NO                                    |  |  |
|        | election to promote/actively campaign for a national or loc  |  | If YES, give details:                 |  |  |
| 39.    | Have you acquired the status of an immigrant or permane  | ent resident of another country?   | ☐ YES ☑                               | NO   |  |
|        |  |  | If YES, give details (count           |  |  |
|        |  |  |                                       |  |  |
| 40.    | Pursuant to: (a) Indigenous People's Act (RA 8371); (b) N 7277); and (c) Solo Parents Welfare Act of 2000 (RA 897)   |  |                                       |  |  |
| a.     | Are you a member of any indigenous group?  | L), please answer the following items:   | ☐ YES ☑                               | NO   |  |
|        | jed a manibal of diff indigonous group?  | you a member of any indigenous group?  |                                       |  |  |
| b.     | Are you a person with disability?  | re you a person with disability?   |                                       |  |  |
| c      | Are you a cale part of   | If YES, please specify ID No:  |                                       |  |  |
| C.     | Are you a solo parent?   | you a solo parent?   |                                       |  |  |
| 41.    | REFERENCES (Person not related by consanguinity or affinity to applica   | ant /appointee)  |                                       |  |  |
|        | NAME   | ADDRESS  | TEL. NO.                              |  |  |
|        | DR. ARIEL B. LUNZAGA   | LEYTE NORMAL UNIVERSITY  | 9554833605                            |  |  |
|        | DR. ELIZABETH QUIMBO   | LEYTE NORMAL UNIVERSITY  | 09205476512                           | 1 25   |  |
|        | ABIGAIL M, CABAGUING   | SAMAR STATE UNIVERSITY   | 9489905670                            |  |  |
| 42.    | I declare under oath that I have personally accomplish   | ned this Personal Data Sheet which is a t  | rue, correct and                      |  |  |
|        | complete statement pursuant to the provisions of per   |  |                                       | 11110/01/01  |  |
|        | Philippines. I authorize the agency head/authorized repre-<br>agree that any misrepresentation made in this do   |  |                                       | TAY OF BANSALE   |  |
|        | administrative/criminal case/s against me.   | Southern and its attachments shall caus  | o the filling of                      |  |  |
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| - 6550 | overnment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance  |  |                                       |  |  |
|        | overnment Issued ID: Passport ID   | Moleb  |                                       |  |  |
| H      |  |  |                                       |  |  |
| -      | Vicense/Passport No.: P42141608  | ox)  |                                       |  |  |
| D      | ate/Place of Issuance: TACLOBAN CITY   | July 15, 2021<br>Date Accomplished   |                                       | Right Thumbmark  |  |
|        | SUBSCRIBED AND SWORN to before me this   | 3 1 AUG 2021 , affiant exhibiti  | ng his/her validly issued governm     | ent ID as indicated above.   |  |
|        | г  |  |                                       |  |  |
|        |  | (Mgmi  |                                       |  |  |
|        |  | ATTY, RYSAN / GUNNOCOR  VSU Chief (gal Officer   |                                       |  |  |
|        | 75 A  | Person Administering Oat   | h                                     |  |  |
|        | The state of the s | reison Administering Oa  |                                       |  |  |