

PERSONAL DATA SHEET

3539

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	LIMBASAN		
FIRST NAME	MARY ANN	NAME EXTENSION (JR., SR)	
MIDDLE NAME	INGUITO		
3. DATE OF BIRTH (mm/dd/yyyy)	11/24/1997	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	TUGUIPA, HILONGOS, 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 checked="" type="checkbox"/> Single <input 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 BATO LEYTE City/Municipality Province
7. HEIGHT (m)	1.51	ZIP CODE	6525
8. WEIGHT (kg)	51		
9. BLOOD TYPE	A	18. PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay BATO LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6525
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	13-250323112-7		
13. SSS NO.	06-4183659-4	19. TELEPHONE NO.	N/A
14. TIN NO.	502-231-311	20. MOBILE NO.	09076788254
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	maanlimbasan24@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	N/A		N/A	N/A
OCCUPATION	N/A		N/A	N/A
EMPLOYER/BUSINESS NAME	N/A		N/A	N/A
BUSINESS ADDRESS	N/A		N/A	N/A
TELEPHONE NO.	N/A		N/A	N/A
24. FATHER'S SURNAME	LIMBASAN		N/A	N/A
FIRST NAME	ROGELIO	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	CILLO		N/A	N/A
25. MOTHER'S MAIDEN NAME			N/A	N/A
SURNAME	INGUITO		N/A	N/A
FIRST NAME	NAZARIA		N/A	N/A
MIDDLE NAME	LOVETE		(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	NAGA PRIMARY SCHOOL	PRIMARY EDUCATION	2004	2008	GRADE 4	N/A	SECOND HONOR
	TAGAYTAY ELEMENTARY SCHOOL		2008	2010	GRADUATED	2010	VALEDICTORIAN
SECONDARY	BATO SCHOOL OF FISHERIES	HIGH SCHOOL	2010	2014	GRADUATED	2014	WITH HONORS
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERISTY	BACHELOR OF SCIENCE IN AGRICULTURE MAJOR IN AGRONOMY	2016	2018	GRADUATED	2018	CUM LAUDE
GRADUATE STUDIES	VISAYAS STATE UNIVERISTY	MASTER OF SCIENCE MAJOR IN AGRONOMY	2018	2021	GRADUATED	2021	N/A

(Continue on separate sheet if necessary)

SIGNATURE	Mary Ann L. Limbasan	DATE	AUGUST 21, 2021
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[illegible][illegible]

SIGNATURE	Mary Ann L. Limbagan	DATE	AUGUST 21, 2021
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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

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Crop care and maintenance		
Fertilizer computation		
Field layout		
Soil sampling		

(Continue on separate sheet if necessary)

SIGNATURE	Mary Ann L. Lindstrom	DATE	AUGUST 21, 2021
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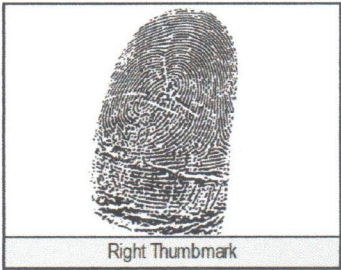
34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau, or Department where you will be appointed, a. within the third degree? b. within the fourth 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 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)		
NAME	ADDRESS	TEL. NO.
RUTH O. ESCASINAS	BAYBAY CITY, LEYTE	9159626403
ANGELA R. ESCOTOTO	BAYBAY CITY, LEYTE	9331703622

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.



PHOTO



Right Thumbmark

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: **Passport ID**

ID/License/Passport No.: **P4018861B**

Date/Place of Issuance: **11/30/19 DFA TACLOBAN**

Mary Ann L. Limbasan
Signature (Sign inside the box)

AUGUST 21, 2021

Date Accomplished

SUBSCRIBED AND SWORN to before me this

28 OCT 2021

, affiant exhibiting his/her validly issued government ID as indicated above.

Mary Ann L. Limbasan
ATTY. RYSAN L. GUMOCOR
VSU Chief Legal Officer

Person Administering Oath