

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	ANDO		
FIRST NAME	LINDY JANE	NAME EXTENSION (JR., SR)	
MIDDLE NAME	LAUREÑO		
3. DATE OF BIRTH (mm/dd/yyyy)	04/13/1997	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	ORMOC CITY	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	<div>House/Block/Lot No. Street</div> <div>PUROK KALIPAYAN MAS-IN</div> <div>Subdivision/Village Barangay</div> <div>ORMOC LEYTE</div> <div>City/Municipality Province</div>
7. HEIGHT (m)	1.6	ZIP CODE	6541
8. WEIGHT (kg)	54		
9. BLOOD TYPE	O+	18. PERMANENT ADDRESS	<div>House/Block/Lot No. Street</div> <div>PUROK KALIPAYAN MAS-IN</div> <div>Subdivision/Village Barangay</div> <div>ORMOC LEYTE</div> <div>City/Municipality Province</div>
10. GSIS ID NO.		ZIP CODE	6541
11. PAG-IBIG ID NO.	1212-1511-0259		
12. PHILHEALTH NO.	1325-0777-5385		
13. SSS NO.	06-4059429-3	19. TELEPHONE NO.	NONE
14. TIN NO.	343-174-893	20. MOBILE NO.	09354421403
15. AGENCY EMPLOYEE NO.	V01109	21. E-MAIL ADDRESS (if any)	lindyjane.ando@vsu.edu.ph

II. FAMILY BACKGROUND


22. SPOUSE'S SURNAME	NA		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NA	NAME EXTENSION (JR., SR)	NA	NA
MIDDLE NAME	NA			
OCCUPATION	NA			
EMPLOYER/BUSINESS NAME	NA			
BUSINESS ADDRESS	NA			
TELEPHONE NO.	NA			
24. FATHER'S SURNAME	ANDO			
FIRST NAME	MAXIMO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	INDOLOS			
25. MOTHER'S MAIDEN NAME				
SURNAME	LAUREÑO			
FIRST NAME	AILEEN			
MIDDLE NAME	LAMIGO			

(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	MAS-IN ELEMENTARY SCHOOL	NA	2002	2008		2008	SECOND HONORS
SECONDARY	NEW ORMOC CITY NATIONAL HIGH SCHOOL	NA	2008	2012		2012	NONE
VOCATIONAL / TRADE COURSE	NA	NA	NA	NA		NA	NA
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN CIVIL ENGINEERING	2012	2017		2017	NONE
GRADUATE STUDIES	NA	NA	NA	NA		NA	NA

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/16/2020
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[illegible]

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	01/16/2020
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[illegible]







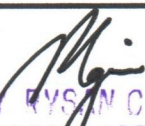
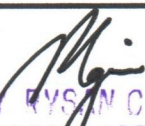
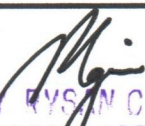
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED
(Start from the most recent L&D training program and include only the relevant L&D training taken for the last five (5) years for Division Chief/Executive/Managerial positions)

[illegible]

VIII. OTHER INFORMATION

[illegible]

SIGNATURE		DATE	04/16/2020
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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)													
<table><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>ENGR. LESLEY JOY BALCOS</td><td>ZAPATERA, CEBU CITY</td><td>9282051067</td></tr><tr><td>PROF. EPIFANIA G. LORETO</td><td>VISAYAS STATE UNIVERSITY, BAYBAY CITY, LEYTE</td><td>9222931815</td></tr><tr><td>ENGR. KHAY TEJERO</td><td>ZAPATERA, CEBU CITY</td><td>9195550364</td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	ENGR. LESLEY JOY BALCOS	ZAPATERA, CEBU CITY	9282051067	PROF. EPIFANIA G. LORETO	VISAYAS STATE UNIVERSITY, BAYBAY CITY, LEYTE	9222931815	ENGR. KHAY TEJERO	ZAPATERA, CEBU CITY	9195550364
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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>PRC</td></tr><tr><td>ID/License/Passport No.:</td><td>0162279</td></tr><tr><td>Date/Place of Issuance:</td><td>ORMOC 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:	PRC	ID/License/Passport No.:	0162279	Date/Place of Issuance:	ORMOC CITY	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>01/16/2020</td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	01/16/2020	Date Accomplished
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SUBSCRIBED AND SWORN to before me this <u>03 FEB 2020</u> , affiant exhibiting his/her validly issued government ID as indicated above.													
<table><tr><td></td></tr><tr><td>ATTY. RYSAN C. GUINOCOR</td></tr><tr><td>VSU LEGAL OFFICER</td></tr><tr><td>Person Administering Oath</td></tr></table>			ATTY. RYSAN C. GUINOCOR	VSU LEGAL OFFICER	Person Administering Oath								
													
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WORK EXPERIENCE SHEET

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

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 from most recent first.

- Duration: September, 2018 – present
- Position: Instructor I
- Name of Office/Unit: Department of Civil Engineering
- Immediate Supervisor: Prof. Epifania G. Loreto
- Name of Agency/Organization and Location: Visayas State University, Visca, Baybay City, Leyte

- Summary of Actual Duties

- Performs instruction, research, and extension functions of the department

- Duration: Feb, 2018 – Aug, 2018
- Position: Office Engineer
- Name of Office/Unit: Construction Project Management Department
- Immediate Supervisor: Engr. Josephine Penuela
- Name of Agency/Organization and Location: Prince Retail Group of Companies, MC Briones St., Cebu City

- Summary of Actual Duties

- Effective coordination with the site engineers, designers, and Contractors
 - Requesting needed materials
 - Effective coordination with procurement and logistics to ensure that materials delivered on site are on right quality and quantity.
 - Assisting the Permit Liaison for the preparation of documents for the issuance of permits.
 - Making of As-built plans.


LINDY JANE L. ANDO

(Signature over Printed Name
of Employee/Applicant)

Date: 01 / 14 / 2020