

PERSONAL DATA SHEET

WARNING: Any misinterpretation 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	FLORES			
FIRST NAME	MARIEVIC		NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	SIEGA			
3. DATE OF BIRTH (mm/dd/yyyy)	10/22/92	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	PAKU, BONTOC, SOUTHERN LEYTE		Philippines	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	If holder of dual citizenship, please indicate the details.		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	<input type="checkbox"/> Married <input type="checkbox"/> Separated	17. RESIDENTIAL ADDRESS	
7. HEIGHT (m)	1.55	House/Block/Lot No. Street		
8. WEIGHT (kg)	45	GUADALUPE		
9. BLOOD TYPE	AB+	Subdivision/Village Barangay		
10. GSIS ID NO.	2005056946	BAYBAY CITY LEYTE		
11. PAG-IBIG ID NO.	ON THE PROCESS	City/Municipality Province		
12. PHILHEALTH NO.	132522455796	ZIP CODE 6521		
13. SSS NO.	N/A	18. PERMANENT ADDRESS		
14. TIN NO.	445-450-298	House/Block/Lot No. Street		
15. AGENCY EMPLOYEE NO.	V-00970	PAKU		
		Subdivision/Village Barangay		
		BONTOC LEYTE		
		City/Municipality Province		
		ZIP CODE 6604		
		19. TELEPHONE NO. N/A		
		20. MOBILE NO. 9552190573		
		21. E-MAIL ADDRESS (if any) Floresmarievic@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		
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	FLORES			
FIRST NAME	REYNALDO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	CAPILITAN	N/A		
25. MOTHER'S MAIDEN NAME				
SURNAME	SIEGA			
FIRST NAME	GERTRUDES			
MIDDLE NAME	MAYMAY			

(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	PAKU ELEMENTARY SCHOOL	PRIMARY EDUCATION	1990	2005	N/A	2005	N/A
SECONDARY	PAKU NATIONAL HIGH SCHOOL	HIGH SCHOOL	2005	2009	N/A	2009	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	SOUTHERN LEYTE STATE UNIVERSITY-CTE	BACHELOR OF SECONDARY EDUCATION	2009	2013	N/A	2013	N/A
GRADUATE STUDIES	SOUTHERN LEYTE STATE UNIVERSITY-CTE	MASTER OF ARTS IN EDUCATION- FILIPINO	2014	2018	N/A	2018	N/A

(Continue on separate sheet if necessary)

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[illegible]

V. WORK EXPERIENCE

[illegible]

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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	N/A				

(Continue on separate sheet if necessary)

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)

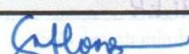
30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	SEMINAR-WORKSHOP ON COMMUNITY ENTRY AND NEEDS ASSESSMENT	1/12/2019	1/12/2019	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	TRAINING - WORKSHOP ON PRESENTING RESEARCH RESULTS	10/22/2018	10/23/2018	16.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	SEMINAR-WORKSHOP ON PREPARING LOGFRAME FOR EFFECTIVE RESEARCH PROPOSAL	10/18/2018	10/18/2018	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	RADIO FOR DEVELOPMENT WORKSHOP	8/6/2018	8/6/2018	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	WRITESHOP ON OUTCOME-BASED EDUCATION COURSE SYLLABI	7/26/2018	7/26/2018	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY COLLEGE OF EDUCATION
	TRAINING WORKSHOP ON INNOVATIVE LEARNING STRATEGIES	5/15/2018	5/16/2018	16.0	TECHNICAL	VISAYAS STATE UNIVERSITY COLLEGE OF EDUCATION
	ECHO SEMINAR-WORKSHOP ON 1ST ASSOCIATION OF EDUCATION RESEARCHERS AND TRAINERS (ASSERT) NATIONAL CONVENTION ON OUTCOME-BASED EDUCATION	4/7/2018	4/7/2018	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	GRADUATE SCHOOL 2ND MULTIDICIPLINARY RESEARCH CONGRESS	03/24/2018	03/24/2018	8.0	TECHNICAL	SOUTHERN LEYTE STATE UNIVERSITY-CTE
	FILIPINO REVIEWER IN PREPARATION FOR HIGH SCHOOL ENTRANCE EXAMINATION	2/24/2018	3/3/2018	8.0	TECHNICAL	VisCA Foundation Elementary School
	ORIENTATION AMONG FACULTY MEMBERS ON ACADEMIC FREEDOM AND PUBLIC ACCOUNTABILITY	9/17/2017	9/17/2017	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	WORKSHOP IN PREPARATION FOR LEVEL I AACCUP	6/10/2017	6/10/2017	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	ORIENTATION SEMINAR AND RETOOLING OF CE FACULTY	4/9/2017	7/19/2016	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	SEMINAR WORKSHOP ON OBE SYLLABUS	03/14/2015	03/15/2015	16.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	PREPARATION OF INSTRUCTIONAL MATERIAL AND COMPUTER AIDED INSTRUCTION	11/27/15	11/27/15	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	CONSTRUCTION OF TABLE OF SPECIFICATION AND FORMULATION OF LET-LIKE QUESTIONS	11/26/2015	11/26/2015	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY DEPARTMENT OF TEACHER EDUCATION
	LICENSURE EXAMINATION FOR TEACHERS (LET) REVIEW	9/9/2015	9/9/2015	8.0	TECHNICAL	VISAYAS STATE UNIVERSITY
	SEMINAR/WORKSHOP ON DATA ENCODER	12/2/2014	02/14/2014	24.0	TECHNICAL	SAINT JAMES COLLEGE OF PADRE BURGOS SOUTHERN LEYTE INC.



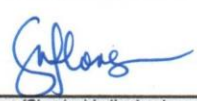
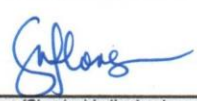
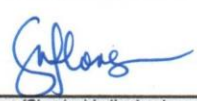
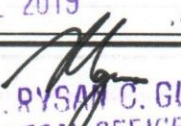
(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	COMPUTER SKILLS		N/A		VSU FACULTY ASSOCIATION (VSUFA)
	WRITING STORIES & POEM				SPEECH COMMUNICATION ORGANIZATION OF THE PHILIPPINES (SCOP)
	SINGING & DANCING				PHILIPPINE ASSOCIATION FOR TEACHERS AND EDUCATORS, INC. (PAFTE)
	EFFECTIVE COMMUNICATION SKILLS				
	TEACHING SKILLS				

(Continue on separate sheet if necessary)

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<div>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.<div style="float: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div><div>a. within the third degree?<div style="float: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</div></div><div>b. within the fourth degree (for Local Government Unit - Career Employees)?<div style="float: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</div></div><div style="clear: both;"></div><div>If YES, give details: _____</div></div> <div>35. a. Have you ever been found guilty of any administrative offense?<div style="float: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div><div style="clear: both;"></div><div>If YES, give details: _____</div><div>b. Have you been criminally charged before any court?<div style="float: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div><div style="clear: both;"></div><div>If YES, give details: _____ Date Filed: _____ Status of Case/s: _____</div></div><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 style="float: right;"><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</div><div style="clear: both;"></div><div>If YES, give details: _____</div></div><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 style="float: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div><div style="clear: both;"></div><div>If YES, give details: _____ <div style="float: right;"><input checked="" type="checkbox"/> NO</div></div></div><div>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?<div style="float: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div><div style="clear: both;"></div><div>If YES, give details: _____</div><div>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 style="float: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div><div style="clear: both;"></div><div>If YES, give details: _____</div></div><div>39. Have you acquired the status of an immigrant or permanent resident of another country?<div style="float: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div><div style="clear: both;"></div><div>If YES, give details (country): _____ <div style="float: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div></div></div><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:<div style="float: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div><div style="clear: both;"></div><div>a. Are you a member of any indigenous group?<div style="float: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div><div style="clear: both;"></div><div>If YES, please specify: _____</div></div><div>b. Are you a person with disability?<div style="float: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div><div style="clear: both;"></div><div>If YES, please specify ID No: _____</div></div><div>c. Are you a solo parent?<div style="float: right;"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div><div style="clear: both;"></div><div>If YES, please specify ID No: _____</div></div></div><div>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)<table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th style="width:40%;">NAME</th><th style="width:40%;">ADDRESS</th><th style="width:20%;">TEL. NO.</th></tr></thead><tbody><tr><td>DR. BAYRON S. BARREDO</td><td>VISCA, BAYBAY CITY, LEYTE</td><td>563-7527</td></tr><tr><td>DR. NORLYN L. BORONG</td><td>MATALOM, LEYTE</td><td>9124056646</td></tr><tr><td>DR. GINALYN B. CARBONILLA</td><td>TOMAS OPPUS, SOUTHERN LEYTE</td><td>9178837622</td></tr></tbody></table></div><div>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>	NAME	ADDRESS	TEL. NO.	DR. BAYRON S. BARREDO	VISCA, BAYBAY CITY, LEYTE	563-7527	DR. NORLYN L. BORONG	MATALOM, LEYTE	9124056646	DR. GINALYN B. CARBONILLA	TOMAS OPPUS, SOUTHERN LEYTE	9178837622	<div style="text-align: center;"> MARIEVIC S. FLORES</div> <div style="text-align: center;"> Right Thumbmark</div>
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<div style="text-align: center;">SUBSCRIBED AND SWORN to before me this 01 JUL 2019, affiant exhibiting his/her validly issued government ID as indicated above.</div> <div style="text-align: center;"><div> ATTY. RYSA C. GUINOCOR VSO LEGAL OFFICER Person Administering Oath</div></div>													