

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)

I. PERSONAL INFORMATION

2. SURNAME	BENITEZ		
FIRST NAME	CECILIO		NAME EXTENSION (JR., SR) N/A
MIDDLE NAME	MONTEROLA		
3. DATE OF BIRTH (mm/dd/yyyy)	10/31/1959	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	Brgy. Kilim, Baybay, Leyte	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street Subdivision/Village Kilim Baybay City Barangay City/Municipality Leyte Province
7. HEIGHT (m)	152.4 m	ZIP CODE	6521
8. WEIGHT (kg)	64.2 kg		
9. BLOOD TYPE	'AB'	18. PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village Brgy. Kilim Baybay City Barangay City/Municipality Leyte Province
10. GSIS ID NO.	2001712847	ZIP CODE	6521
11. PAG-IBIG ID NO.	1210-4827-2421		
12. PHILHEALTH NO.	13-025105498-4		
13. SSS NO.	03-5764954-1	19. TELEPHONE NO.	N/A
14. TIN NO.	145-332-135	20. MOBILE NO.	09637517516
15. AGENCY EMPLOYEE NO.	V01184	21. E-MAIL ADDRESS (if any)	cecilio.benitez@vsu.edu.ph

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	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	BENITEZ			
FIRST NAME	CATALINO (DECEASED)	NAME EXTENSION (JR., SR)		
MIDDLE NAME	SENO			
25. MOTHER'S MAIDEN NAME				
SURNAME	MONTEROLA			
FIRST NAME	MACARIA (DECEASED)			
MIDDLE NAME	CERNA			

(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	KILIM ELEMENTARY SCHOOL	PRIMARY	1968	1974	GRADUATED	1974	N/A
SECONDARY	BAYBAY HIGH SCHOOL	SECONDARY	1974	1978	GRADUATED	1978	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION	ASSOCIATE IN SECRETARIAL SCIENCE	1978	1980	GRADUATED	1980	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	November 28, 2022
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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	November 28, 2022
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[illegible]







VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]

VIII. OTHER INFORMATION

[illegible]

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<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>Status of Case/s: _____</p>												
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>												
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>												
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <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. ELIZA D. ESPINOSA, DiSDS</td> <td>VSU, Baybay City, Leyte</td> <td>563-7497</td> </tr> <tr> <td>Dr. HUMBERTO R. MONTES, Jr., PhD Marine Science</td> <td>VSU, Baybay City, Leyte</td> <td>563-7726</td> </tr> <tr> <td>Dr. MARLITO M. BANDE, Dr.sc.agr.</td> <td>VSU, Baybay City, Leyte</td> <td>563-7497</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	Dr. ELIZA D. ESPINOSA, DiSDS	VSU, Baybay City, Leyte	563-7497	Dr. HUMBERTO R. MONTES, Jr., PhD Marine Science	VSU, Baybay City, Leyte	563-7726	Dr. MARLITO M. BANDE, Dr.sc.agr.	VSU, Baybay City, Leyte	563-7497
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<p>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.</p>													
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<p>SUBSCRIBED AND SWORN to before me this <u>25 JAN 2023</u> affiant exhibiting his/her validly issued government ID as indicated above.</p>													
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