

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	TROYO			
FIRST NAME	RODEN		NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	DY			
3. DATE OF BIRTH (mm/dd/yyyy)	14/14/1984	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	BAYBAY, LEYTE	If holder of dual citizenship, please indicate the details	Philippines	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street	
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:		Subdivision/Village Barangay	
7. HEIGHT (m)	1.78 m		BAYBAY LEYTE	
8. WEIGHT (kg)	76 kg		City/Municipality Province	
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	House/Block/Lot No. Street	
10. GSIS ID NO.	021-1324-1950-0	19. TELEPHONE NO.	Subdivision/Village Barangay	
11. PAG-IBIG ID NO.	N/A		BAYBAY LEYTE	
12. PHILHEALTH NO.	N/A		City/Municipality Province	
13. SSS NO.	N/A		6521	
14. TIN NO.	438-449-686	20. MOBILE NO.	09088103741	
15. AGENCY EMPLOYEE NO.	V00812	21. E-MAIL ADDRESS (if any)	roden.troyo@vsu.edu.ph	

II. FAMILY BACKGROUND

22. SPOUSES SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME			N/A	N/A
MIDDLE NAME				
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	TROYO			
FIRST NAME	ENRIQUE	NAME EXTENSION (JR., SR)	N/A	
MIDDLE NAME	CONDES			
25. MOTHER'S MAIDEN NAME				
SURNAME	DY			
FIRST NAME	ANITA			
MIDDLE NAME	MORALES		(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	ACCELERATED CHRISTIAN SCHOOL (ACS)	PRIMARY EDUCATION	1991	1997		1997	N/A
SECONDARY	VISCA LABORATORY HIGH SCHOOL	HIGH SCHOOL	1997	2001		2001	N/A
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	LEYTE STATE UNIVERSITY	BS in AGRICULTURE/	2001	2005		2005	N/A
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MS in HORTICULTURE	2010	2013		2013	DOST-ASTHRDP Scholarship
	UNIV. OF THE PHILIPPINES LOS BANOS (UPLB)	PhD in HORTICULTURE	2016	on-going			CHED

SIGNATURE		DATE	5/2/2024
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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	5/2/2024
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

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

[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)
MICROPROPAGATION OF HORTICULTURAL CROPS	NA	PHIL. ASSOC. OF PLANT TISSUE CULTURE AND BIOTECHNOLOGY (PAPTCB, INC)
		PHIL. SOCIETY OF LACTIC ACID BACTERIA (PSLAB)
		VSU Faculty Association (VFA)
		PHIL SOC OF THE STUDY OF NATURE AND SCIENCE (PSSN)
		SAER
		PHI SIGMA HONOR SOCIETY UPLB Chapter

(Continue on separate sheet if necessary)

SIGNATURE		DATE	5/2/2024
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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)?

☐ YES

☒ NO

☐ YES

☒ 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?

☐ YES

☒ NO

If YES, give details:

☐ YES

☒ NO

If YES, give details:

Date Filed:

Status of Cases:

36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?

☐ YES

☒ 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?

☒ YES

☐ NO

If YES, give details:

Finished contract

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?

☐ YES

☒ NO

If YES, give details:

☐ YES

☒ NO

If YES, give details:

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES

☒ 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?

☐ YES

☒ NO

If YES, please specify:

☐ YES

☐ NO

If YES, please specify ID No:

☐ YES


☒ NO

If YES, please specify ID No:

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
DR. ARSENIO D. RAMOS	DOH, VSU, VISCA, BAYBAY CITY, LEYTE	053-563-7739
DR. VICTOR B. ASIO	CAFS, VSU, VISC, BAYBAY CITY, LEYTE	053-563-7435
DR. CATHERINE C. ARRADAZA	DOH, VSU, VISCA, BAYBAY CITY, LEYTE	053-565-0600

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.



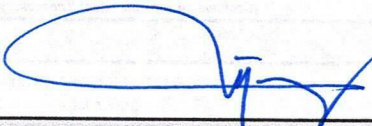
RODEN D. TROYO

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.: 2705


Date/Place of Issuance: 8/1/2005



Signature (Sign inside the box)


5/5/2024

Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this 14 MAY 2024, affiant exhibiting his/her validly issued government ID as indicated above.


ATTY. RYAN C. GUINOCOR
VSU Chief 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: July 1, 2019 - Present
- Position: Assistant Professor 2
- Name of Office/Unit: Department of Horticulture
- Immediate Supervisor: Dr. Rosario A. Salas
- Name of Agency/Organization and Location: Visayas State University

- Duration: January 1, 2017 – June 30, 2019
- Position: Instructor 3
- Name of Office/Unit: Department of Horticulture
- Immediate Supervisor: Dr. Rosario A. Salas
- Name of Agency/Organization and Location: Visayas State University

- Duration: June 1, 2013 – December 31, 2016
- Position: Instructor 1
- Name of Office/Unit: Department of Horticulture
- Immediate Supervisor: Dr. Jun Acedo
- Name of Agency/Organization and Location: Visayas State University

List of Accomplishments and Contributions (if any)

Instruction

- Taught undergraduate and graduate courses in Advanced Ornamental Horticulture, Floriculture and Landscape Gardening, General Horticulture, Postharvest Physiology & Technology, Practicum in Horticulture
- Advised undergraduate and graduate students (academic adviser and thesis adviser, SRC and GAC)
- Developed course syllabus and learning modules

Research

- Conducted research on the development and evaluation of functional productivity of edible landscapes
- Published relevant research articles in peer-reviewed journals

Extension

- Project Leader - HELP Ornamentals
- Subject Matter Specialist – Ornamental/Vegetable Production and Landscape Gardening

Production

- Project Manager – Ornamental Crop Nursery Project

- Project Manager – Cut-flower Production Project

Other functions

- Unit Head – Grounds and Landscape Maintenance Office
- Project Head – VSU Convention Center
- Division Head – Ornamental Crop Division
- Chairman and Member of University, College and Department Committee

- Summary of Actual Duties

Balance the teaching, research, extension and production responsibilities. Able to conduct independent research, managed income generating projects of the department and university, and managed a unit providing support to the students and the university. Promotes and directs successful students learning in keeping with the learning-centered values and goals of the school.

- Duration: July 1, 2009 - October 30, 2010
- Position: Executive Assistant to the General Manager
- Name of Office/Unit: NA
- Immediate Supervisor: Ma. Deena Pages
- Name of Agency/Organization and Location: Nature Works Landscaping Services

- Duration: September 1, 2009 - December 31, 2008
- Position: Horticulturist/Landscape Designer
- Name of Office/Unit: NA
- Immediate Supervisor: Ma. Deena Pages
- Name of Agency/Organization and Location: Nature Works Landscaping Services

- Duration: December 1, 2005 - August 31, 2006
- Position: Landscape Supervisor
- Name of Office/Unit: NA
- Immediate Supervisor: Ruth O. Padriga
- Name of Agency/Organization and Location: Nature Works Landscaping Services

- List of Accomplishments and Contributions (if any)

- Secured two multi-million projects in 1 year
- Improved business prospects, closed numerous deals, and completed numerous projects during my tenure.
- Performed special projects as directed by the General Manager, including review and analysis of information, managing field supervisors, and serving as project manager.
- Participated in brainstorming sessions for various projects.
- Negotiated contracts with clients and maintained daily contact with clients at location sites.

- Reduced company expenses on materials and equipment by negotiating and establishing mutually beneficial vendor contact.
- Took charge in gathering and maintaining proper data
- Managed landscape personnel to perform to the highest work standards of the company.
- Conducted presentations and demonstrations for commercial clients.

- Summary of Actual Duties

- Maintained good relationship with field supervisors, project managers, administrative staff and executives. Communicated with clients and conducted discussions, presentations and demonstrations for commercial clients. Took charge in gathering and maintaining proper data records, and analyzing, writing and presenting reports. Worked cooperatively with staff for good customer service, coordinated technical staff including collective discussions and solving various issues. Assisted other executives and administrative staff in attainment of goals and objectives, compliance with policies and procedure, use of equipment and forms, improvement in work flow.



RODEN D. TROYO

(Signature over Printed Name
of Employee/Applicant)

Date: 05/02/2024