

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                    | PLENOS  |   |  |      |
| FIRST NAME                    | MARY CRIS   | NAME EXTENSION (JR., SR) N/A                                |  |      |
| MIDDLE NAME                   | FLORES  |   |  |      |
| 3. DATE OF BIRTH (mm/dd/yyyy) | 12/24/1994  | 16. CITIZENSHIP   | <input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship<br><input type="checkbox"/> by birth <input type="checkbox"/> by naturalization<br>Pls. indicate country: |      |
| 4. PLACE OF BIRTH             | 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<br><input type="checkbox"/> Widowed <input type="checkbox"/> Separated<br><input type="checkbox"/> Other/s: | 17. RESIDENTIAL ADDRESS                                     | House/Block/Lot No. Street<br>MATAPAY<br>Subdivision/Village Barangay<br>HILONGOS LEYTE<br>City/Municipality Province<br>6524  |      |
| 7. HEIGHT (m)                 |   | 18. PERMANENT ADDRESS                                       | House/Block/Lot No. Street<br>MATAPAY<br>Subdivision/Village Barangay<br>HILONGOS LEYTE<br>City/Municipality Province<br>6524  |      |
| 8. WEIGHT (kg)                | 70 kg   |   | ZIP CODE   | 6524 |
| 9. BLOOD TYPE                 | type O  |   | ZIP CODE   | 6524 |
| 10. GSIS ID NO.               |   |   |  |      |
| 11. PAG-IBIG ID NO.           |   |   |  |      |
| 12. PHILHEALTH NO.            |   |   |  |      |
| 13. SSS NO.                   |   | 19. TELEPHONE NO.   |  |      |
| 14. TIN NO.                   | 496-814-236-000   | 20. MOBILE NO.  | 09357934646  |      |
| 15. AGENCY EMPLOYEE NO.       |   | 21. E-MAIL ADDRESS (if any)                                 | mc.plenos@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     | PLENOS    |                              |   |                            |
| FIRST NAME               | RICHARD   | NAME EXTENSION (JR., SR) N/A |   |                            |
| MIDDLE NAME              | WENCESLAO |                              |   |                            |
| 25. MOTHER'S MAIDEN NAME | FLORES    |                              |   |                            |
| SURNAME                  | ELIZABETH |                              |   |                            |
| FIRST NAME               | GUBALANE  |                              |   |                            |
| MIDDLE NAME              |           |                              |   |                            |

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) | YEAR GRADUATED | SCHOLARSHIP/ ACADEMIC HONORS RECEIVED |
|---------------------------|----------------------------------|---|----------------------|------------|--------------------------------------|----------------|---------------------------------------|
|                           |                                  |   | From                 | To         |                                      |                |                                       |
| ELEMENTARY                | Grelina Osmena Christian College | Elementary Graduate                           | 01/06/2001           | 01/04/2007 | Graduated                            | 2007           |                                       |
| SECONDARY                 | Grelina Osmena Christian College | High school Graduate                          | 02/06/2007           | 01/04/2012 | Graduated                            | 2012           |                                       |
| VOCATIONAL / TRADE COURSE | N/A                              | N/A   | N/A                  |            |                                      | N/A            | N/A                                   |
| COLLEGE                   | Visayas State University         | BS in Statistics                              | 01/06/2012           | 02/04/2016 | Graduated                            | 2016           |                                       |
| GRADUATE STUDIES          | Visayas State University         | MS in Agricultural Economics                  | 01/08/2016           | 01/06/2019 | Graduated                            | 2019           |                                       |

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| SIGNATURE         |  | DATE |  |
| December 14, 2020 |  |      |  |



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## V. WORK EXPERIENCE

*(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.*

| DATE<br>(mm/dd/yyyy) | POSITION TITLE | DEPARTMENT / AGENCY / OFFICE / COMPANY | MONTHLY<br>SALARY | PAY GRADE (if<br>applicable) & STEP | STATUS OF<br>APPOINTMENT | GOV'T<br>SERVICE |
|----------------------|----------------|--|-------------------|-------------------------------------|--------------------------|------------------|
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| SIGNATURE |  | DATE | December 14, 2020 |
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

| 29. | NAME & ADDRESS OF ORGANIZATION<br>(Write in full) | INCLUSIVE DATES<br>(mm/dd/yyyy) |     | NUMBER OF HOURS | POSITION / NATURE OF WORK |
|-----|---|---------------------------------|-----|-----------------|---------------------------|
|     |   | From                            | To  |                 |                           |
|     | N/A   | N/A                             | N/A | N/A             | 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<br>INTERVENTIONS/TRAINING PROGRAMS<br>(Write in full)    | INCLUSIVE DATES OF<br>ATTENDANCE<br>(mm/dd/yyyy) |            | NUMBER OF HOURS | Type of LD<br>( Managerial/<br>Supervisory/<br>Technical/etc) | CONDUCTED/ SPONSORED BY<br>(Write in full)                |
|-----|--|--|------------|-----------------|---|---|
|     |  | From   | To         |                 |   |   |
|     | Training Series on Selected Advanced Quantitative Approaches for Project Impact Evaluation | 12/03/2018                                       | 12/07/2018 | 40.0            | TECHNICAL   | Visayas Socio-Economic Research and Data Analytics Center |
|     | Spatial Econometrics Using QGIS and R  | 10/23/2018                                       | 10/27/2019 | 40.0            | TECHNICAL   | SERDAL, UPLB  |
|     | Time-Series Analysis Using Stata   | 10/01/2018                                       | 11/05/2018 | 40.0            | TECHNICAL   | SERDAL, UPLB  |
|     | Training Series on Selected Quantitative Approaches to Project Impact Evaluation           | 9/24/2018  | 9/28/2019  | 40.0            | TECHNICAL   | Visayas Socio-Economic Research and Data Analytics Center |
|     | Training-Workshop on Survey Methods using Online Platform: Open Data Kit                   | 08/03/2018                                       |            | 8.0             | TECHNICAL   | Visayas Socio-Economic Research and Data Analytics Center |
|     | Seminar on Socio-Economic Researches in Agriculture, Aquatic and Natural Resources         | 07/31/2018                                       |            | 8.0             | TECHNICAL   | Visayas State University Visca, Baybay City, Leyte        |
|     |  |  |            |                 |   |   |
|     |  |  |            |                 |   |   |
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|     |  |  |            |                 |   |   |

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

| 31. | SPECIAL SKILLS and HOBBIES | NON-ACADEMIC DISTINCTIONS / RECOGNITION<br>(Write in full) | 33. | MEMBERSHIP IN<br>ASSOCIATION/ORGANIZATION<br>(Write in full) |
|-----|----------------------------|--|-----|--|
|     | none                       | none   |     | none   |
|     |                            |  |     |  |
|     |                            |  |     |  |
|     |                            |  |     |  |
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(Continue on separate sheet if necessary)

|           |   |      |                   |
|-----------|---|------|-------------------|
| SIGNATURE |  | DATE | December 14, 2020 |
|-----------|---|------|-------------------|



|  |  |
|--|--|
| 34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person who has immediate supervision over you in the Bureau or Department where you will be appointed,<br>a. within the third degree?<br>b. within the fourth degree (for Local Government Unit - Career Employees)? | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, give details: _____  |
| 35. a. Have you ever been found guilty of any administrative offense?<br><br>b. Have you been criminally charged before any court?   | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, give details: _____<br><br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, give details: _____<br>Date Filed: _____<br>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<br>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<br>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)?<br><br>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<br>If YES, give details: _____<br><br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>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<br>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<br>a. Are you a member of any indigenous group?<br>b. Are you a person with disability?<br>c. Are you a solo parent?   | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, please specify: _____<br><br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, please specify ID No: _____<br><br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If YES, please specify ID No: _____ |

| 41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee) |                       |            |
|--|-----------------------|------------|
| NAME   | ADDRESS               | TEL. NO.   |
| Moises Neil V. Serino  | VSU Baybay City Leyte | 9363706515 |
|  |                       |            |

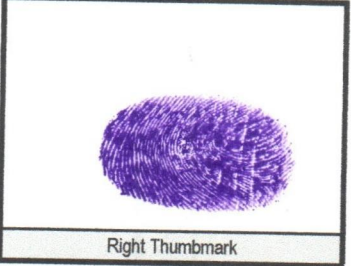
42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate 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

|  |                            |
|--|----------------------------|
| Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)<br>PLEASE INDICATE ID Number and Date of Issuance |                            |
| Government Issued ID:  | Passport ID                |
| ID/License/Passport No.:   | P3512014A                  |
| Date/Place of Issuance:  | June 28, 2017 DFA Tacloban |

|                                 |  |
|---------------------------------|--|
|                                 |  |
| Signature (Sign inside the box) |  |
| December 14, 2020               |  |
| Date Accomplished               |  |



Right Thumbmark

SUBSCRIBED AND SWORN to before me this 23 FEB 2021, affiant exhibiting his/her validly issued government ID as indicated above.

|  |
|--|
| <br>ATTY. RYSAM L. GUINOCOR<br>VSU Chief Legal Officer |
| Person Administering Oath                              |