

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

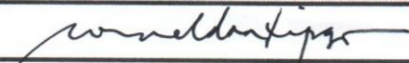
2. SURNAME	ANTIPASO		
FIRST NAME	CONNEL	NAME EXTENSION (JR., SR)	
MIDDLE NAME	DIESTRO		
3. DATE OF BIRTH (mm/dd/yyyy)	6/20/1962	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	ROXAS CITY	If holder of dual citizenship, please indicate the details.	<input type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		Pls. indicate country:
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input checked="" type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	DUPLEX, VISAYAS STATE UNIVERSITY
7. HEIGHT (m)	1.5	ZIP CODE	House/Block/Lot No. Street
8. WEIGHT (kg)	48		PANGASUGAN
9. BLOOD TYPE	"A"		Subdivision/Village Barangay
10. GSIS ID NO.	3898777		BAYBAY CITY LEYTE
11. PAG-IBIG ID NO.	1700-0024-0527	City/Municipality Province	6521-A
12. PHILHEALTH NO.	13-000054092-8	18. PERMANENT ADDRESS	DUPLEX, VISAYAS STATE UNIVERSITY
13. SSS NO.	03-8302867-3	ZIP CODE	House/Block/Lot No. Street
14. TIN NO.	108-816-179		PANGASUGAN
15. AGENCY EMPLOYEE NO.	V-000042		Subdivision/Village Barangay
			BAYBAY CITY LEYTE
		City/Municipality Province	6521-A
		19. TELEPHONE NO.	(053) 563-7170
		20. MOBILE NO.	0917 310-1458
		21. E-MAIL ADDRESS (if any)	cdantipaso@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	ANTIPASO		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	VICENTE	NAME EXTENSION (JR., SR)	VINCENT NEL DIESTRO ANTIPASO	AUG. 29, 1986
MIDDLE NAME	BUCOG		DIEZANNE JIREH DIESTRO ANTIPASO	7/22/1994
OCCUPATION	GOVERNMENT EMPLOYEE			
EMPLOYER/BUSINESS NAME	VISAYAS STATE UNIVERSITY			
BUSINESS ADDRESS	INSTITUTE OF HUMAN KINETICS, VSU, BAYBAY CITY, LEYTE			
TELEPHONE NO.	(053) 563-7396			
24. FATHER'S SURNAME	DIESTRO			
FIRST NAME	CONRADO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	DELFIN			
25. MOTHER'S MAIDEN NAME				
SURNAME	DIESTRO			
FIRST NAME	LIBERTAD			
MIDDLE NAME	CUDILLA			

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	PANITAN ELEMENTARY SCHOOL ANNEX, PANITAN, CAPIZ	PRIMARY EDUCATION	1968	1974		1974	
SECONDARY	FILAMER CHRISTIAN INSTITUTE, ROXAS CITY	HIGH SCHOOL	1974	1978		1978	1 <sup>st</sup> HONORABLE MENTION
COLLEGE	CENTRAL PHILIPPINE UNIVERSITY, ILOILO CITY	BACHELOR OF SCIENCE IN COMMERCE	1978	1979	FIRST YEAR		
	SILLIMAN UNIVERSITY, DUMAGUETE CITY	BACHELOR OF SCIENCE IN AGRICULTURE (AGRIBUSINESS)	1979	1984		1984	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF SCIENCE IN DEVELOPMENT COMMUNICATION	1996	to date	CANDIDATE		

SIGNATURE		DATE	04-25-17
-----------	---	------	----------



[illegible]

## V. WORK EXPERIENCE

[illegible]

**SIGNATURE**

DATE \_\_\_\_\_

04.25.17



# 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			
	Delivering Higher Education Institution (DHEI) Assembly	2/24/2017	2/24/2017	8.0		Commission on Higher Education Regional Office VIII
	Seminar Workshop on 5S and Records Management	2/18/2017	2/18/2017	8.0		Visayas State University
	Visayas Interagency Roadshow on Government Transition Programs for Displaced HEI Personnel and HEI Administrators	8/26/2016	8/26/2016	8.0		Commission on Higher Education Regional Office VII
	Curriculum Review for Graduate Programs	1/21/2016	1/22/2016	16.0		Visayas State University
	Implementation of Outcomes-Based Education (OBE)	5/4/2015	5/5/2015	16.0		Visayas State University
	Seminar on the Senior High School Program	10/11/2013	10/11/2013	8.0		Visayas State University
	Erasmus Mundus Action II - Staff Training	4/8/2013	5/5/2013			Masaryk University, Brno, Czech Republic
	Briefing of Staff Involved in the Conduct of Evaluation of Academic Staff by the Students	1/14/2013	1/14/2013	8.0		Visayas State University
	Seminar on Fire Prevention	3/30/2012	3/30/2012	8.0		Visayas State University
	Forum on Anti-Red Tape Law and CSC Policy on Cash Advances	9/24/2012	9/24/2012	8.0		Visayas State University
	Personality Development Seminar for Frontliners	9/20/2012	9/20/2012	8.0		Visayas State University
	Gender Sensitivity Training and sExual Harassment Orientation for Frontline Service Providers	9/17/2012	9/17/2012	8.0		Visayas State University

(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)
	Layouting/Desktop Publishing	N/A			Member, VSU Administrative Personnel Association
	Graphics Designing				Member, Silliman University Association, ViSCA Chapter
	Develop certificates, programs, invitations				Adviser, Hugpong Ilonggo

(Continue on separate sheet if necessary)

SIGNATURE	DATE
-----------	------

*comeldantiga*

DATE

04-15-17



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?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

b. Have you been criminally charged before any court?

☐ YES ☒ 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?

☐ 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: \_\_\_\_\_

38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?

☐ YES ☒ NO

If YES, give details: \_\_\_\_\_

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: \_\_\_\_\_

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?

☐ YES ☒ NO

If YES, please specify: \_\_\_\_\_

b. Are you a person with disability?

☐ YES ☒ NO

If YES, please specify ID No: \_\_\_\_\_

c. Are you a solo parent?

☐ 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. EDGARDO E. TULIN	VISAYAS STATE UNIVERSITY, BAYBAY CITY, LEYTE	563-7067
DR. BEATRIZ S. BELONIAS	VISAYAS STATE UNIVERSITY, BAYBAY CITY, LEYTE	563-7106
PASTOR JOSHUA JIREH SALOMON	CHRIST BAPTIST CHURCH, GUADALUPE, BAYBAY CITY, LEYTE	563-7484

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.

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)

PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: UNIVERSITY ID

ID/License/Passport No.: V000042

Date/Place of Issuance: Jan. 4, 2010

Signature (Sign inside the box)

04. 25. 17

Date Accomplished



SUBSCRIBED AND SWORN to before me this APR 26 2017, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. RYSAN C. GUINOCOR

NOTARY PUBLIC

UNTIL DECEMBER 31, 2017

Person Administering Oath

PTR 0193869 - BAYBAY/LEYTE 11/21/17

IBP 1030924 - TAGLOBAN CITY - 12/19/16

MCLE COMP. NO. V-0002582 - 07/20/15

ROLL OF ATTORNEYS NO. 57467