

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	SUMAYANG		
FIRST NAME	KEVIN	NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	REAS		
3. DATE OF BIRTH (mm/dd/yyyy)	05/03/1997	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	ABUYOG, LEYTE	If holder of dual citizenship, please indicate the details.	<input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Pls. indicate country:
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	Brgy. Libertad, Abuyog, Leyte
7. HEIGHT (m)	1.63	ZIP CODE	6510
8. WEIGHT (kg)	62		18. PERMANENT ADDRESS
9. BLOOD TYPE		ZIP CODE	6510
10. GSIS ID NO.	N/A		19. TELEPHONE NO.
11. PAG-IBIG ID NO.	N/A	20. MOBILE NO.	09751408877
12. PHILHEALTH NO.	01-255206721-3	21. E-MAIL ADDRESS (if any)	kevin.sumayang@vsu.edu.ph
13. SSS NO.	N/A		
14. TIN NO.	762-107-330		
15. AGENCY EMPLOYEE NO.	N/A		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		NAME EXTENSION (JR., SR)	N/A	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME					
MIDDLE NAME					
OCCUPATION					
EMPLOYER/BUSINESS NAME					
BUSINESS ADDRESS					
TELEPHONE NO.					
24. FATHER'S SURNAME	SUMAYANG				07/05/1971
FIRST NAME	RUEL	JR.			
MIDDLE NAME	LOPEZ				
25. MOTHER'S MAIDEN NAME					20/01/1973
SURNAME	REAS				
FIRST NAME	CHARLYNA				
MIDDLE NAME	DAGONGDONG				

(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	LIBERTAD ELEMENTARY SCHOOL	BASIC EDUCATION CURRICULUM	2003	2009		2009	NA
SECONDARY	LIBERTAD NATIONAL HIGH SCHOOL	BASIC EDUCATION CURRICULUM	2009	2013		2013	NA
VOCATIONAL / TRADE COURSE	N/A	N/A					
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SECONDARY EDUCATION	2010	2014		2014	Cum Laude
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTERS OF EDUCATION IN PHYSICAL EDUCATION	2020	2022		2022	NA

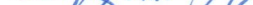
(Continue on separate sheet if necessary)

SIGNATURE		DATE	10/12/2022
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IV. CIVIL SERVICE ELIGIBILITY						
27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	LICENSED PROFESSIONAL TEACHER	84.6	29/09/2019	TACLOBAN CITY	1813462	04/04/2020

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

[illegible]

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	10/12/2022

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	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 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			
	VSU E-LEARNING ENVIRONMENT TRAINING-WORKSHOP SERIES	12/07/2020	12/07/2020	8	TECHNICAL	VISAYAS STATE UNIVERSITY
	GOOGLE CLASSROOM WORKSHOP FOR VSU FACULTY	05/19/2020	05/21/2020	24	TECHNICAL	VISAYAS STATE UNIVERSITY

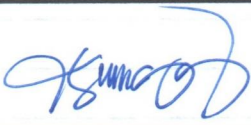

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Teaching, communication skills, dancing, singing, & hosting				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	10/12/2022
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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)?	<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>									
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</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><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</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><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</div> <div>If YES, give details: Finished Contract</div>									
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?	<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>									
39. Have you acquired the status of an immigrant or permanent resident of another country?	<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</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: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	<div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>									
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)										
<table><tr><td>Dr. Aleli A. Villocino</td><td>VSU, Visca, Baybay City, Leyte</td><td>0917-304-0879</td></tr><tr><td>Dr. Rosario P. Abela</td><td>VSU, Visca, Baybay City, Leyte</td><td>0918-364-1159</td></tr><tr><td>Dr. Shalom Grace C. Sugano</td><td>VSU, Visca, Baybay City, Leyte</td><td>0912-265-4495</td></tr></table>		Dr. Aleli A. Villocino	VSU, Visca, Baybay City, Leyte	0917-304-0879	Dr. Rosario P. Abela	VSU, Visca, Baybay City, Leyte	0918-364-1159	Dr. Shalom Grace C. Sugano	VSU, Visca, Baybay City, Leyte	0912-265-4495
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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>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: PRC</div> <div>ID/License/Passport No.: 1822829</div> <div>Date/Place of Issuance: 12/27/2019 - ORMOC, CITY</div>	<div><div></div><div>Signature (Sign inside the box)</div><div>10/12/2022</div><div>Date Accomplished</div></div> <div><div></div><div>Right Thumbmark</div></div>									
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.										
<div>Person Administering Oath</div>										