PERSONAL DATA SHEET

WARNING: Any misinterpretation 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. 1. CS ID No. Print legibly. Tick appropriate boxes (and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use only) 2. SURNAME MASENDO NAME EXTENSION (JR., SR) FIRST NAME JAN ANA MIDDLE NAME BARTOI IN 3. DATE OF BIRTH 1/5/1983 16. CITIZENSHIP (mm/dd/yyyy) ✓ Filipino ☐ Dual Citizenship by birth by naturalization 4. PLACE OF BIRTH Baybay, Leyte Pls. indicate country: If holder of dual citizenship, please indicate the details. 5. SEX ☐ Male **✓** Female W ✓ Single ☐ Married 17 RESIDENTIAL ADDRESS 6 CIVIL STATUS Separated House/Biock/Lot No. ☐ Widowed Street Guadalupe Other/s: Subdivision/Village Barangay Baybay Leyte 7. HEIGHT (m) 1.5 m City/Municipality Province 8 WEIGHT (kg) 54 kgs ZIP CODE 6521 18. PERMANENT ADDRESS 9 BLOOD TYPE A House/Block/Lot No. Street Guadalupe 10. GSIS ID NO. 956 0593897 01 5 Subdivision/Village Barangay Baybay Leyte 11. PAG-IBIG ID NO. 1700-0030-0049 City/Municipalit 12. PHILHEALTH NO. 13-000075387-5 6521 ZIP CODE 13. SSS NO. N/A 19. TELEPHONE NO. 053 5637887 14 TIN NO 943-258-086 20. MOBILE NO. 09171080150 15. AGENCY EMPLOYEE NO. V000328 21. E-MAIL ADDRESS (if any) jmasendo@yahoo.com 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 N/A MIDDLE NAME N/A N/A N/A OCCUPATION N/A N/A N/A EMPLOYER/BUSINESS NAME N/A N/A N/A BUSINESS ADDRESS N/A NIA N/A TELEPHONE NO N/A N/A N/A 24. FATHER'S SURNAME Masendo (deceased) N/A N/A AME EXTENSION (JR., SR) FIRST NAME Ignacio N/A N/A MIDDLE NAME Ruiz N/A N/A 25. MOTHER'S MAIDEN NAME N/A N/A SURNAME Bartolini N/A N/A FIRST NAME Alicia N/A MIDDLE NAME Pabroquez (Continue on separate sheet if necessary EDUCATIONAL BACKGRO SCHOLARSHIP HIGHEST LEVEL PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE ACADEMIC I FVFI UNITS EARNED (Write in full) GRADUATED (Write in full) HONORS (if not graduated) RECEIVED From To FLEMENTARY **ViSCA Foundation Elementary School Primary Education** 1989 1995 N/A 1995 N/A SECONDARY **ViSCA Laboratory High School High School** 1995 1999 N/A 1999 with honors VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A TRADE COURSE University of San Carlos College of COLLEGE **Bachelor of Science in Nursing** 2001 2005 N/A 2005 N/A Nursing GRADUATE STUDIES Cebu Normal University Master of Science in Nursing N/A N/A 15 units N/A N/A SIGNATURE DATE plomacendo-April 25, 2017

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE Nurses Licensure Exam		RATING (If Applicable)	RATING DATE OF EXAMINATION / PLACE OF EXAMINATION / CONFERMENT		NATION / CONFERMENT		NUMBER	pplicable) Date Valid	
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	XPERIENCE ate employment.	Start from your recent	t work) Description	of duties should be	indicated in the attached	d Work Exper	ience sheet.		
	ISIVE DATES m/dd/yyyy)	POSITION 1	TTLE DEPARTMENT / AG		NCY/OFFICE/COMPANY	MONTHLY	SALARYI JOBI PAY GRADE (if	STATUS OF	GOV
From	То	(Write in full/Do not	abbreviate)	(Write in ful	/Do not abbreviate)	SALARY	applicable)& STEP (Format *00-0*)/ INCREMENT	APPOINTMENT	SER (Y
1/1/2017	present	Nurse	Ш	Visayas State	University Hospital	33131.00	SG 17	Permanent	
1/1/2016	12/31/2016	Nurse	III	Visayas State	31183.00	SG 17	Permanent		
11/29/2015	12/31/2015	Nurse III		Visayas State	29348.00	SG 17	Permanent	,	
11/29/2012	11/28/2015	Nurse III		Visayas State	29028.00	SG 17	Permanent		
6/1/2012	11/28/2012	Nurse II		Visayas State	24887.00	SG 15	Permanent	,	
6/1/2011	5/31/2012	Nurse II		Visayas State University Hospital		22688.00	SG 15	Permanent	,
6/24/2010	5/31/2011	Nurse II		Visayas State University Hospital		20490.00	SG 15	Permanent	,
2/1/2010	6/23/2010	Nurse II		Visayas State University Hospital		18292.00	SG 15	Permanent	,
7/1/2008	1/3/2010	Public Health Nurse I		Visayas State University Hospital		614.18/day	N/A	Casual	1
7/1/2007	6/3/2008	Public Health Nurse I		Visayas State University Hospital		558.36/day	N/A	Casual	
1/1/2007	6/30/2007	Public Health	Nurse I	Leyte St	Leyte State University		N/A	Casual	,
5/25/2006	12/31/2006	Public Health Nurse I		Leyte State University		507.59/day	N/A	Casual	,
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VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / IN AGOVERNMENT	/ PEOPLE / VOI	UNTARY OR	GANIZATION/S			
		INCLUSI	VE DATES		~		
	NAME & ADDRESS OF ORGANIZATION (Write in full)		(mm/dd/yyyy)			POSITION / NATURE OF WORK	
N/A	From N/A	N/A	N/A		NA NA		
NA.	10 1 L 1	N/A	N/A	N/A		N/A	
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I. LEARNING AND DEVELOPMENT (L&D) art from the most recent L&D/training program and inc.) INTERVENTIONS/TRAINING PA	ROGRAMS ATT	ENDED		marial nasidione)		
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TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	(Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
97.21.0	SA LU SON	From	То		Technical/etc)	The second professional control	
mary Care for Social Hygiene Clinic and Sa	77.00	3/20/2017	3/23/2017	N/A	N/A	Department of Health - Region 8	
HIV in the Workplace	e Seminar	12/9	/2016	N/A	N/A	Visayas State University	
Training for Basic Pollution	n Control Officer	7/18/2016	7/22/2016	N/A	N/A	PCAPPI - 8 / DENR	
Health Education Promotion Officer Con	nsultative Workshop Lecture	12/3/2012	12/4/2012	16	N/A	Department of Health - Region 8	
Barangay Legal Educat	tion Seminar	11/23/2012	11/24/2012	16	N/A	UP Law Center Training and Convention	
Gender Sensitivity	Training	9/24	/2012	8.0	N/A	Diliman, Quezon City Visayas State University	
Pollution Control Officers Se	eminar Workshop	3/23	/2012	8.0	N/A	DENR - Region 8	
Bsic Life Support		3/14/2012	3/16/2012	24.0	N/A	Visayas State University / DOH	
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II. OTHER INFORMATION	(Co	ontinue on separate s	theet if necessary				
31. SPECIAL SKILLS and HOBBIES	32. NO	N-ACADEMIC DISTIN		NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZAT	
singing densing playing hedrinter	(Write in full)				(wine in tull)		
singing, dancing, playing badminton		N/A		Philippine Nurses Association Pollution Control Association of the			
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34.	Are you related by consanguinity or affinity to the pointin chief of bureau or office or to the person who has immediate Bureau or Department where you will be appointed,		* .	
	a. within the third degree?	YES V NO		
	b. within the fourth degree (for Local Government Unit - Ca	Employage)2		
	b. Within the fourth degree (for Local Government Critic - Oc	areer Employees):	☐ YES ☑ NO If YES, give details:	
			ii 1E3, give details.	
	a Have you ever been found quilty of any administrative a	fforma?		
5.	a. Have you ever been found guilty of any administrative of	mense?	☐ 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 a	any law, decree, ordinance or regulation by	YES NO	
	any court or tribunal?		If YES, give details:	
		公司在1000000	, ,, g., o,	
37	Have you ever been separated from the service in any of the	he following modes: resignation		
n.	retirement, dropped from the rolls, dismissal, termination, e		☐ YES ☑ NO If YES, give details:	
	(abolition) in the public or private sector?	# TAOL COM MARKONE	ii 120, give details.	was follow years
38	a. Have you ever been a candidate in a national or local el	lection held within the last year (except	Duran same kausta (Dikastan sika	
	Barangay election)?	man man Jack Jack Jack	☐ YES ☑ NO If YES, give details:	
	SEC SARRANT AND A	su procest forces		
	b. Have you resigned from the government service during		☐ YES ☑ NO	
	election to promote/actively campaign for a national or loca	al candidate?	If YES, give details:	
39.	Have you acquired the status of an immigrant or permaner	nt resident of another country?	☐ YES ☑ NO	
		e iroxusto	If YES, give details (country):	
		8 5405 754	400 CO 100 CO 10	Julio C
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma	agna Carta for Disabled Persons (RA	21. 3	
	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972			
	Are you a member of any indigenous group?			
			☐ YES ✓ NO If YES, please specify:	
	Are you a person with disability?		☐ YES ☑ NO	
			If YES, please specify ID No:	
	Are you a solo parent?		YES NO	
	The second secon		If YES, please specify ID No:	
41.	REFERENCES (Person not related by consanguinity or affinity to applicant	nt /appointee)		
	NAME	ADDRESS	TEL. NO.	
		Office of the Director for Administration		
	Lourdes B. Cano, PhD	and Human Resource Development,	053 5637643	
_		Visayas State Unviersity	(3	6
_	Elwin Jay V. Yu, MD	Visayas State University Hospital	053 5637510	The state of the s
	Josephine O. Zafico, MD	Visayas State University Hospital	053 5637510	
42.	I declare under oath that I have personally accomplished	ed this Personal Data Sheet which is a tr	ue, correct and	
	complete statement pursuant to the provisions of perti	inent laws, rules and regulations of the I	Republic of the	tomusenda- do, Jan Ana
	Philippines. I authorize the agency head/authorized repres	sentative to verify/validate the contents state	d nerein.	20, Jan 7116
	agree that any misrepresentation made in this doc	cument and its attachments shall cause	e the filing of	РНОТО
	administrative/criminal case/s against me.			
G	overnment legical IDs. 2			
P	overnment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance	10 10 10 10 10 10 10 10 10 10 10 10 10 1	40,000	
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ID	/License/Passport No.: V 000 328	Signature (Sign inside the bo April 25, 2017	x)	Palacia.
Da	ate/Place of Issuance:	Right	Thumbmark	
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	SUBSCRIBED AND SWORN to before me this	, affiant exhibitin	g his/her validly issued government ID as indi	cated above.
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