

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	CINCO		
FIRST NAME	MARK ANTHONY	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	TABUNAN		
3. DATE OF BIRTH (mm/dd/yyyy)	12/08/1997	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	HINUNANGAN, SOUTHERN LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	<input type="checkbox"/> Married <input type="checkbox"/> Separated	
7. HEIGHT (m)	1.64	17. RESIDENTIAL ADDRESS	N/A N/A House/Block/Lot No. Street N/A SANTO NIÑO 1 Subdivision/Village Barangay HINUNANGAN SOUTHERN LEYTE City/Municipality Province
8. WEIGHT (kg)	84	ZIP CODE	6608
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS	N/A N/A House/Block/Lot No. Street N/A SANTO NIÑO 1 Subdivision/Village Barangay HINUNANGAN SOUTHERN LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6608
11. PAG-IBIG ID NO.	1212-5753-0097	19. TELEPHONE NO.	N/A
12. PHILHEALTH NO.	1325-1630-8188	20. MOBILE NO.	09070574197
13. SSS NO.	34-8707651	21. E-MAIL ADDRESS (if any)	mark.cinco@vsu.edu.ph
14. TIN NO.	610-137-044		
15. AGENCY EMPLOYEE NO.	N/A		

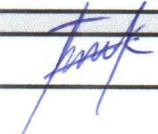
II. FAMILY BACKGROUND

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		N/A	N/A
OCCUPATION	N/A		N/A	N/A
EMPLOYER/BUSINESS NAME	N/A		N/A	N/A
BUSINESS ADDRESS	N/A		N/A	N/A
TELEPHONE NO.	N/A		N/A	N/A
24. FATHER'S SURNAME	CINCO		N/A	N/A
FIRST NAME	ANTONIO	NAME EXTENSION (JR., SR) N/A	N/A	N/A
MIDDLE NAME	CAMAHALAN		N/A	N/A
25. MOTHER'S MAIDEN NAME			N/A	N/A
SURNAME	TABUNAN		N/A	N/A
FIRST NAME	ARLYN		N/A	N/A
MIDDLE NAME	USARES		(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	OTAMA ELEMENTARY SCHOOL	N/A	06/01/2008	03/30/2010	N/A	2010	8TH HONOR
SECONDARY	HOLY ROSARY ACADEMY INC.	N/A	06/01/2010	03/30/2014	N/A	2014	EEC SCHOLAR
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BS AGRICULTURE MAJOR IN PLANT BREEDING	01/01/2016	06/30/2019	N/A	2019	DA BIOTEH SCHOLAR
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF SCIENCE IN AGRONOMY	01/01/2021	Present	6 Units	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	May 31, 2023
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[illegible]

V. WORK EXPERIENCE

[illegible]

SIGNATURE		DATE	May 31, 2023
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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		
	HINGYAP PH	02/06/2021	02/07/2021	16 HOURS	Volunteer in the campaign of DOH for the vaccination of polio and tigras at Palo, Leyte
	KABALIKAT CIVICOM	07/22/2021	PRESENT	N/A	Action officer and communicator

(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)
DRIVING (R1)	N/A	KABALIKAT CIVICOM 938 STATION
		KNIGHTS OF COLUMBUS

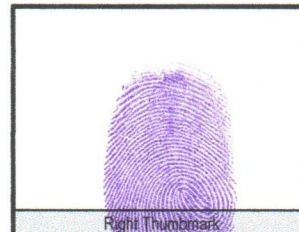
(Continue on separate sheet if necessary)

SIGNATURE		DATE	May 31, 2023
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<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>Status of Case/s: _____</p>												
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>												
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>												
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant / appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">NAME</th> <th style="width: 33%;">ADDRESS</th> <th style="width: 33%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>JOSE L. BACUSMO</td> <td>BRGY. STA. CRUZ, BAYBAY</td> <td>9686906880</td> </tr> <tr> <td>FEDERICO GODOY</td> <td>VSU, BAYBAY</td> <td>9754481699</td> </tr> <tr> <td>MAE ANN A. BRAVO</td> <td>VSU, BAYBAY</td> <td>9464729899</td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	JOSE L. BACUSMO	BRGY. STA. CRUZ, BAYBAY	9686906880	FEDERICO GODOY	VSU, BAYBAY	9754481699	MAE ANN A. BRAVO	VSU, BAYBAY	9464729899
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<p>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.</p>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td style="padding: 2px;">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td style="padding: 2px;">Government Issued ID: DRIVE'S LISENCE</td> </tr> <tr> <td style="padding: 2px;">ID/License/Passport No.: H12-19-001151</td> </tr> <tr> <td style="padding: 2px;">Date/Place of Issuance: DECEMBER 4, 2019</td> </tr> </table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)	PLEASE INDICATE ID Number and Date of Issuance	Government Issued ID: DRIVE'S LISENCE	ID/License/Passport No.: H12-19-001151	Date/Place of Issuance: DECEMBER 4, 2019	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 80px; text-align: center; vertical-align: middle;"> Signature (Sign inside the box) 11 JUL 31, 2023 Date Accomplished </td> </tr> </table>	 Signature (Sign inside the box) 11 JUL 31, 2023 Date Accomplished						
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<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>SUBSCRIBED AND SWORN to before me this <u>24 JUL 2023</u></p> </div> <div style="width: 45%; text-align: right;"> <p>affiant exhibiting his/her validly issued government ID as indicated above.</p> </div> </div> <div style="text-align: center; margin-top: 20px;"> ATTY. RYAN C. GUINOCOR VSU Chief Legal Officer Person Administering Oath </div>													



PHOTO



Right Thumbmark