

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 ( ) ☐ ☒ 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                    | FLORES                                                                                                                                                                            |                                                             |                                                                                                                                                                                                  |
| FIRST NAME                    | MARIA ZAIDA                                                                                                                                                                       | NAME EXTENSION (JR., SR) N/A                                |                                                                                                                                                                                                  |
| MIDDLE NAME                   | ARRADAZA                                                                                                                                                                          |                                                             |                                                                                                                                                                                                  |
| 3. DATE OF BIRTH (mm/dd/yyyy) | 12/9/1967                                                                                                                                                                         | 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             | Baybay City 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 <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s: | 17. RESIDENTIAL ADDRESS                                     | #705 M-H del Pilar Street<br>House/Block/Lot No. Street<br>Zone 9<br>Subdivision/Village Barangay<br>Baybay City Leyte<br>City/Municipality Province                                             |
| 7. HEIGHT (m)                 | 163 cm.                                                                                                                                                                           | 18. PERMANENT ADDRESS                                       | #705 M-H del Pilar Street<br>House/Block/Lot No. Street<br>Zone 9<br>Subdivision/Village Barangay<br>Baybay City Leyte<br>City/Municipality Province                                             |
| 8. WEIGHT (kg)                | 70 kgs                                                                                                                                                                            | 19. TELEPHONE NO.                                           | 053-525-0140-1058                                                                                                                                                                                |
| 9. BLOOD TYPE                 | "O"                                                                                                                                                                               | 20. MOBILE NO.                                              | 09268686630                                                                                                                                                                                      |
| 10. GSIS ID NO.               | 67120901408                                                                                                                                                                       | 21. E-MAIL ADDRESS (if any)                                 | mariazaida.flores@vsu.edu.ph                                                                                                                                                                     |
| 11. PAG-IBIG ID NO.           | 1700-0024-9463                                                                                                                                                                    |                                                             |                                                                                                                                                                                                  |
| 12. PHILHEALTH NO.            | B- 000014235-3                                                                                                                                                                    |                                                             |                                                                                                                                                                                                  |
| 13. SSS NO.                   | 620994475                                                                                                                                                                         |                                                             |                                                                                                                                                                                                  |
| 14. TIN NO.                   | 157-642-999                                                                                                                                                                       |                                                             |                                                                                                                                                                                                  |
| 15. AGENCY EMPLOYEE NO.       | 007-721                                                                                                                                                                           |                                                             |                                                                                                                                                                                                  |

II. FAMILY BACKGROUND

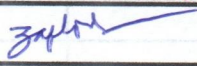
|                          |          |                                                     |                            |
|--------------------------|----------|-----------------------------------------------------|----------------------------|
| 22. SPOUSE'S SURNAME     | n/a      | 23. NAME of CHILDREN (Write full name and list all) | DATE OF BIRTH (mm/dd/yyyy) |
| FIRST NAME               | n/a      | 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     | FLORES   |                                                     |                            |
| FIRST NAME               | DOUGLAS  | SR.                                                 |                            |
| MIDDLE NAME              | LORETO   |                                                     |                            |
| 25. MOTHER'S MAIDEN NAME |          |                                                     |                            |
| SURNAME                  | ARRADAZA |                                                     |                            |
| FIRST NAME               | CECILIA  |                                                     |                            |
| MIDDLE NAME              | GESULGA  |                                                     |                            |

(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                | Franciscan College of the Immaculate Conception | Graduated                                     |                      |    | Certificate                                    | 1960           | Diploma                               |
| SECONDARY                 | Franciscan College of the Immaculate Conception | Graduated                                     |                      |    | Diploma                                        | 1984           | Diploma                               |
| VOCATIONAL / TRADE COURSE | None                                            |                                               | N/A                  |    | None                                           | None           | None                                  |
| COLLEGE                   | Franciscan College of the Immaculate Conception | Bachelor of Arts                              |                      |    | Diploma                                        | 1989           | Diploma                               |
| GRADUATE STUDIES          | N/A                                             |                                               | N/A                  |    | None                                           | None           | None                                  |

(Continue on separate sheet if necessary)

|           |                                                                                     |      |          |
|-----------|-------------------------------------------------------------------------------------|------|----------|
| SIGNATURE |  | DATE | 12/12/22 |
|-----------|-------------------------------------------------------------------------------------|------|----------|

#### IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(Continue on separate sheet if necessary)

## V. WORK EXPERIENCE

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

[illegible]

# VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

| NAME & ADDRESS OF ORGANIZATION<br>(Write in full)                     | INCLUSIVE DATES<br>(mm/dd/yyyy) |         | NUMBER OF HOURS | POSITION / NATURE OF WORK            |
|-----------------------------------------------------------------------|---------------------------------|---------|-----------------|--------------------------------------|
|                                                                       | From                            | To      |                 |                                      |
| FCIC Alumni Association                                               | 198 4                           | present |                 | Alumni Member                        |
| CYMWA, Brgy. Sto. Rosario Baybay City Leyte                           | 6/6/1905                        | present |                 | Member/Facilitator/Coordinator       |
| Sto. Padre Pio religious group (Baybay Chapter)                       | Sept. 23, 2013                  | present |                 | Member/Facilitator/Coordinator       |
| Community Service/Outreach Program (Brgy. Sto. Rosario/Zone 9)        | May 1, 2007                     | present |                 | Coordinator/Facilitator              |
| BEC Cell #1 Sto. Padre Pio Group, San Isidro Chapel Baybay City Leyte | Sept. 1, 2018                   | present |                 | Group Leader/Coordinator/Facilitator |
|                                                                       |                                 |         |                 |                                      |
|                                                                       |                                 |         |                 |                                      |

(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)

| TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS<br>(Write in full)                              | INCLUSIVE DATES OF ATTENDANCE<br>(mm/dd/yyyy) |     | NUMBER OF HOURS | Type of LD<br>(Managerial/Supervisory/Technical/etc) | CONDUCTED/ SPONSORED BY<br>(Write in full)      |
|-------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-----|-----------------|------------------------------------------------------|-------------------------------------------------|
|                                                                                                                   | From                                          | To  |                 |                                                      |                                                 |
| Re-Orientation on the Documentary Requirements for Financial Administrative Transactions                          | December 5, 2022                              |     | 4 hours         |                                                      | Accounting Office, Budget Office, RSSPRO, OVPAF |
| ISO Audit 4th Cycle                                                                                               | Sept. 29, 2022                                | N/A | N               | N/A                                                  |                                                 |
| CSC Culmination Program RDE Hall, OVPREI                                                                          | Sept. 27, 2022                                | N/A |                 |                                                      | RDE Hall OVPREI                                 |
| Opening of the 4th ISO 9001:2015 Internal Quality Audit                                                           | Sept. 19, 2022                                |     |                 | N/A                                                  | RDE Hall OVPREI                                 |
| Orientation/Re-Orientation of Duties & Responsibilities as dDRCs & adDRC & Records Control Documented Information | Sept. 7, 2022                                 | N/A |                 |                                                      | CCE Bldg.                                       |
| 122nd CSC Philippine Civil Service Anniversary/Oath Taking Ceremony                                               | Sept. 5, 2022                                 |     |                 |                                                      | RDE Hall OVPREI                                 |
| AdPA General Assembly Meeting                                                                                     | April 22, 2022                                |     |                 |                                                      | RDE Hall OVPREI                                 |
| Annual VSUCC General Assembly Meeting                                                                             | March 26, 2022                                |     |                 |                                                      | RDE Hall OVPREI                                 |
| Opening ISO 2nd Surveillance Audit @RDE Hall                                                                      | March 15, 2022                                |     |                 | N/A                                                  | RDE Hall OVPREI                                 |
| VSU ISO 9001 Surveillance                                                                                         | Feb. 4, 2021                                  |     |                 |                                                      | OP, OVPREI, QAC                                 |
| Final Briefing 1st ISO Surveillance Audit                                                                         | Feb. 2, 2021                                  |     |                 |                                                      | QAC, VSU                                        |
| Orientation & Recascading of Internal Documented Information                                                      | Jan. 28, 2021                                 | N/A |                 |                                                      | QAC, VSU                                        |
| QMS Onboarding VSU Quality Management System                                                                      | Jan. 27, 2021                                 |     |                 |                                                      | QAC, VSU                                        |
| Re-Orientation of the HR process cascading of HR Forms                                                            | Feb. 4, 2021                                  |     |                 |                                                      | CCE Bldg, NARC, VSU                             |
| Seminar Workshop on Records Matrix & NAP Form 1 Completion                                                        | Dec. 13, 2019                                 | N/A |                 |                                                      | CC Bldg 1st Floor                               |
| Awareness Seminar on RA# 11032 & PDS Training                                                                     | Nov. 26-27, 2019                              |     |                 |                                                      | RDE Hall OVPREI                                 |
| Human Resource Mgt. Information System Training                                                                   | Nov. 25, 2019                                 | N/A |                 |                                                      | VSU Convention Center                           |
| Briefing Orientation on PDF for NBC 461                                                                           | Nov. 15, 2019                                 | N/A |                 |                                                      | QAC, VSU                                        |
| ISO End Process Audit                                                                                             | Sept. 16, 2019                                |     |                 |                                                      | CC Bldg. VSU Baybay City Leyte                  |
| Briefing on ISO                                                                                                   | Sept. 6, 2019                                 | N/A | N/A             |                                                      | QAC, VSU                                        |
| GSIS Financial Literacy Seminar                                                                                   | Jul. 8, 2019                                  |     |                 |                                                      | PhilRootcrops Training Hall, VSU                |
| Seminar on Bomb Threat Awareness                                                                                  | Apr. 5, 2019                                  |     |                 |                                                      | RDE Hall, OVPREI VSU                            |

(Continue on separate sheet if necessary)

# VIII. OTHER INFORMATION

| SPECIAL SKILLS and HOBBIES                                                                                                                                                                                                                                                                                                                                                                         | 32. NON-ACADEMIC DISTINCTIONS / RECOGNITION<br>(Write in full) | MEMBERSHIP IN ASSOCIATION/ORGANIZATION<br>(Write in full)                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|---------------------------------------------------------------------------|
| computer literate, bookkeeping, record management, handicraft making, cooking, driving motorcycle, playing volleyball, table tennis, gardening and landscaping, community service organizing, events facilitator and coordinator, facilitating meetings, trainings, seminars, workshop, conferences, Evaluation Facilitator of VSU Faculty Teaching Performance, extension coordinator facilitator | N/A                                                            | FCIC Alumni Association, CYMWA, Administrative VSU Personnel Association, |
|                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                |                                                                           |

(Continue on separate sheet if necessary)

|                                                                                     |          |
|-------------------------------------------------------------------------------------|----------|
| SIGNATURE                                                                           | DATE     |
|  | 12/17/22 |

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?  
  
b. Have you been criminally charged before any court?

☐ YES☒ NO

☐ 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)?  
  
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:

☐ 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?  
b. Are you a person with disability?  
c. Are you a solo parent?

☐ YES☒ NO

If YES, please specify:

☐ YES☒ NO

If YES, please specify ID No:

☐ 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. FELICIANO G. SINON | NARC,VSU                            | 9173108072 |
| DR. LUZ O. MORENO      | NARC,VSU                            | 9164239381 |
| DR. RUBEN M. GAPASIN   | Brgy. Guadalupe, Baybay City, Leyte | 9176336571 |

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: UMID GSIS CARD

ID/License/Passport No.: CRN 006-0061-3305-6

Date/Place of issuance: NA

Signature (Sign inside the box)

12/29/22

Date Accomplished

SUBSCRIBED AND SWORN to before me this 25 JAN 2023, affiant exhibiting his/her validly issued government ID as indicated above.

ATY. RYAN C. GUMOCOR  
Person Administering Oath

CS FORM 212 (Revised 2017), Page 4 of 4