

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	ANDO		
FIRST NAME	JENNIFER	NAME EXTENSION (JR., SR)	
MIDDLE NAME	EVANGELIO		
3. DATE OF BIRTH (mm/dd/yyyy)	10/27/1980	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	Baybay City, Leyte	If holder of dual citizenship, please indicate the details.	Philippines
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	Lot 219 Sitio Lunas House/Block/Lot No. Street Bunga Subdivision/Village Barangay Baybay Leyte City/Municipality Province
7. HEIGHT (m)	1.50	ZIP CODE	18. PERMANENT ADDRESS
8. WEIGHT (kg)	81		Lot 219 Sitio Lunas House/Block/Lot No. Street Bunga Subdivision/Village Barangay Baybay Leyte City/Municipality Province
9. BLOOD TYPE	AB+		
10. GSIS ID NO.	2004088327		
11. PAG-IBIG ID NO.	0021-416170-06	19. TELEPHONE NO.	
12. PHILHEALTH NO.	01-050263415-7	20. MOBILE NO.	0926-555-6469
13. SSS NO.	N/A	21. E-MAIL ADDRESS (if any)	jhenando@vsu.edu.ph
14. TIN NO.	236-429-030-000		
15. AGENCY EMPLOYEE NO.	V000714		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Ando	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Joevel	Ando, Jezrelle Fernan E.	11/5/2004
MIDDLE NAME	Tumale	Ando, Jeroen Zydor E.	5/15/2009
OCCUPATION	N/A		
EMPLOYER/BUSINESS NAME	N/A		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	N/A		
24. FATHER'S SURNAME	Evangelio (Deceased)		
FIRST NAME	Fernando		
MIDDLE NAME	Artizon		
25. MOTHER'S MAIDEN NAME	Castro (Deceased)		
SURNAME	Castro (Deceased)		
FIRST NAME	Fe		
MIDDLE NAME	Castor		

(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	Visca Foundation Elementary School	Primary Education	6/1/1987	3/19/1993	N/A	1993	Principal's List
SECONDARY	Visca Laboratory High School	High School	6/1/1993	3/20/1997	N/A	1997	With Honors
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	Silliman University	Bachelor of Mass Communication	6/1/1997	3/21/2001	N/A	2001	Graduate
GRADUATE STUDIES	Visayas State University	MS Language Teaching	1/16/2017	present			CHED

(Continue on separate sheet if necessary)

SIGNATURE		DATE	4/25/2017
-----------	---	------	-----------

[illegible]

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

[illegible]

SIGNATURE	<i>[Signature]</i>	DATE	4/25/2017
-----------	--------------------	------	-----------

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION

[illegible]

(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)

[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)
Baking	SRA Model of the Year 2016	Administrative Personnel Association (ADPA)
Singing		
Surfing the Web		
Watching K Drama Series		

(Continue on separate sheet if necessary)

SIGNATURE	<i>[Signature]</i>	DATE	4/25/2017
-----------	--------------------	------	-----------

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

If YES, give details:

☐ 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:
resignat

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. Othello B. Capuno	OVPRE, VSU, Baybay City, Leyte	563-7458
Prof. Efren B. Saz	Office of the Director for Extension, OVPRE, VSU, Baybay City, Leyte	563-7458
Dr. Lourdes B., Cano	ODAHRD, VSU, Baybay City, Leyte	563-7643

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.

JENNIFER E. ANDO

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: V000714

ID/License/Passport No.:

Date/Place of Issuance: 03/09/2011/VSU

Signature (Sign inside the box)
4/25/2017
Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this APR 25 2017, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. RYAN C. GUINOCOR

NOTARY PUBLIC

Person Administering Oath

PTR 0195858 - BAYBAY CITY, LEYTE - 11/12/17
IBP 1030924 - TAGLUBAN CITY - 12/19/16
MCLE COMP. NO. V-0002520 - 07/20/15
ROLL OF ATTORNEYS NO. 57467

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