SIGNATURE

Revised 2017 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 2. SURNAME **VALDEVIESO** FIRST NAME **GELBERTO** MIDDLE NAME POLIQUIT 3. DATE OF BIRTH 11/18/1974 16. CITIZENSHIP **☑** Filipino ☐ Dual Citizenship (mm/dd/yyyy) by birth by naturalization 4. PLACE OF BIRTH BAYBAY, LEYTE If holder of dual citizenship, Pls. indicate country: please indicate the details ✓ Male ☐ Female 5 SEX **PUROK 2** ☐ Single ✓ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS House/Block/Lot No ■ Widowed ☐ Separated Street GABAS Other/s: Subdivision/Village Barangay BAYBAY LEYTE 7. HEIGHT (m) 16.2m City/Municipality Province 8. WEIGHT (kg) 74 kg ZIP CODE 6521 **PUROK 2** 18. PERMANENT ADDRESS 9. BLOOD TYPE A+ House/Block/Lot No. Street GARAS 10, GSIS ID NO. 2004131969 Subdivision/Village Barangay BAYBAY LEYTE 11 PAG-IBIG ID NO 1211-0077-0393 City/Municipality Province 12. PHILHEALTH NO. 19-052299237-6 ZIP CODE 6521 13. SSS NO. 33-1801902-3 19. TELEPHONE NO. (053)-563-1286 14. TIN NO. 230-727-870-000 (0975)-343-9655 20 MORII E NO 15. AGENCY EMPLOYEE NO. VO0719 21. E-MAIL ADDRESS (if any) gelberto.valdevieso@vsu.edu.ph FAMILY BACKGROUND VALDEVIESO 22. SPOUSE'S SURNAME 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) ABIJAH GIL MAZO VALDEVIESO LEILANI FIRST NAME 09/27/2000 ABIGAIL MAZO VALDEVIESO MIDDLE NAME MAZO 08/06/2005 JAEL MAZO VALDEVIESO OCCUPATION 11/03/2006 DOM ROBERT MAZO VALDEVIESO EMPLOYER/BUSINESS NAME **VISAYAS STATE UNIVERSITY (VSU)** 08/20/2014 VISCA, BAYBAY CITY, LEYTE BUSINESS ADDRESS TELEPHONE NO. FATHER'S SURNAME VALDEVIESO FIRST NAME **ROBERTO** MIDDLE NAME TATOY MOTHER'S MAIDEN NAME POLIQUIT SURNAME **JEVINA** FIRST NAME MIDDLE NAME MADERA (Continue on separate sheet if necessary) EDUCATIONAL BACKGROUND SCHOLARSHIP HIGHEST LEVEL PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE ACADEMIC LEVEL UNITS EARNED HONORS RECEIVED (Write in full) (Write in full) GRADUATED From To **GABAS COMMUNITY SCHOOL** FLEMENTARY FI FMENTARY 06/06/1981 03/06/1987 GRADUATED 1986 NONE **BAYBAY NATIONAL HIGH SCHOOL** SECONDARY HIGH SCHOOL NONE 06/06/1988 03/03/1993 GRADUATED 1993 VOCATIONAL / TESDA PWS-TESDA CERTICATE NO.061316038395 PASSED 2006 NONE TRADE COURSE COLLEGE N/A **GRADUATE STUDIES** N/A

1/47/9 DATE

CS FORM/212 (Revised 2017), Page 1 of

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	vate employme LUSIVE DATES	nt. Start from your recen	t work) Description	of duties should be	indicated in the attached	Work Expe	JOB/ PAY	eet.	
(r	mm/dd/yyyy)	POSITION TITLE (Write in full/Do not abbreviate)		DEPARTMENT / AGE (Write in full	MONTHLY SALARY	GRADE (if applicable)& STEP	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)	
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02/01/2005	08/30/2009	JEEPNEY D	500	10	MARIK TRANSPORT	P8,000.00	NA NA	N/A	NO
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	OR INVOLVEMENT IN CIVIC / NON-GO			OLUNTARY O	RGANIZA	ATION/S	
9. NAME	NAME & ADDRESS OF ORGANIZATION (Write in full)		INCLUSIVE DATES (mm/dd/yyyy)			POSITION / NATURE OF WORK	
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II. LEARNING AND DE	EVELOPMENT (L&D) INTERVENTIONS/	TRAINING P	ROGRAMS AT	TENDED			
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30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From To		NUMBER OF HOURS	(Managerial/ Supervisory/ Technical/et	CONDUCTED/ SPONSORED BY (Write in full)	
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31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEN	(Write in full)	S / RECOGNITION	,		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
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			Section 1. The section of the sectio		
34.	Are you related by consanguinity or affinity to the appointin				
	chief of bureau or office or to the person who has immedial Bureau or Department where you will be apppointed,	VOTADA E TO SERVICE DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DEL CONTRA DEL CONTRA DEL CONTRA DEL CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE			
	a. within the third degree?		☐ YES ☑ NO		
	b. within the fourth degree (for Local Government Unit - Ca	areer Employees)?	YES NO		
	,	noor Employees	If YES, give details:		
35.	a. Have you ever been found guilty of any administrative of	ffense?	☐ YES ☑ NO		
9.1			If YES, give details:		
arrest.	b. Have you been criminally charged before any court?		☐ YES ☑ NO		
	The second secon	Appenditure to the second seco	If YES, give details:		
			Date Filed:		
			Status of Case/s:		
36.	Have you ever been convicted of any crime or violation of a regulation by any court or tribunal?	☐ YES ☑ NO			
	regulation by any count of unburial:	If YES, give details:			
	CHERRY CHARMED CHIEF BOOK HAS AZARTE DAYACCES BY	B [878300 at]	PRINCE OF THE PR		
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, e		☐ YES ☑ NO		
	phased out (abolition) in the public or private sector?	and of term, finished contract of	If YES, give details:		
38.	a. Have you ever been a candidate in a national or local ele	ection held within the last year (except	t PES NO		
	Barangay election)?	A Secretion	T YES ☑ NO If YES, give details:		
	b. Have you resigned from the government service during t	the three (3)-month period before the	☐ YES ☑ NO		
	last election to promote/actively campaign for a national or		If YES, give details:		
39.	Have you acquired the status of an immigrant or permanen	nt resident of another country?			
			☐ YES ☑ NO If YES, give details (country):		
40.					
	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?		YES INO		
b.	Are you a person with disability?		If YES, please specify:		
	Are you a person with disability :		☐ YES ☑ NO If YES, please specify ID No:		
C.	Are you a solo parent?		YES VO		
A Agent	and the second s		If YES, please specify ID No:		
41.	REFERENCES (Person not related by consanguinity or affinity to applica	ant /appointee)			
	NAME	ADDRESS	TEL. NO.		
	DR. PASTOR P.GARCIA	VISCA, BAYBAY CITY, LEYTE	9395906956		
	DR. LOURDES B. CANO				
_		SAN ISIDRO, BAYBAY CITY, LEYTE			
	MR. JUANITO F. POLIQUIT	PATAG, BAYBAY CITY, LEYTE	9772167205		
42.	. Total of all all all all all all all all all al				
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2.20	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance		Table 21 (27 PM CDIST)		
G	Government Issued ID: DRIVER'S LICENSE	auxoco			
IC	D/License/Passport No.: N01-99-240997	Signature (Sign inside th	>		
-	Date/Place of Issuance: 11/18/2017 LTO, BAYBAY, LEYTE				
L	dell'ides di localitico.	Date Accomplished	ed Right Thumbmark		
	SUBSCRIBED AND SWORN to before me this	affiant ex	xhibiting his/her validly issued government ID as indicated above.		
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