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

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM 1. CS ID No. (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes (🔲 and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE I. PERSONAL INFORMATION POSAS 2 SURNAME NAME EXTENSION (JR., SR) **JERRY** FIRST NAME MIDDLE NAME BANTACULO 3. DATE OF BIRTH 16. CITIZENSHIP MAY 17, 1970 ✓ Filipino Dual Citizenship (mm/dd/yyyy) ✓ by birth by naturalization Pls. indicate country: BRGY. MARCOS BAYBAY CITY LEYTE If holder of dual citizenship, 4. PLACE OF BIRTH please indicate the details Female ✓ Male 5. SFX MARCOS 17. RESIDENTIAL ADDRESS 789 Married Single 6 CIVIL STATUS ouse/Block/Lot N Street Widowed Separated MARCOS MARCOS Other/s: Barangay odivision/Villag LEYTE BAYBAY 5 " 10 7. HEIGHT (m) Province City/Municipalit 82 Kgs ZIP CODE 8. WEIGHT (kg) MARCOS 789 18. PERMANENT ADDRESS A 9. BLOOD TYPE Street House/Block/Lot No MARCOS 70051701389 10. GSIS ID NO. Barangay Subdivision/Village LEYTE BAYBAY 1700-0025-8866 11. PAG-IBIG ID NO. Province City/Municipality 6521 ZIP CODE 13-000014213-2 12. PHILHEALTH NO 563-0542 13. SSS NO. 19. TELEPHONE NO. 09058528754 14. TIN NO. 116-626-533 20. MOBILE NO. 001394498 jerryposas@ymail.com 21. E-MAIL ADDRESS (if any) 15. AGENCY EMPLOYEE NO. **FAMILY BACKGROUND** 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) 22. SPOUSE'S SURNAME POSAS NAME EXTENSION (JR., SR) LEO CLAIRE S. POSAS 11/09/1992 ROSANA FIRST NAME GERALD SMITH S. POSAS 05 -20 -1995 SURINGA MIDDLE NAME JOSEPH JERARD S. POSAS 09 - 17 - 2002 HOUSEWIFE OCCUPATION CARNEL ERWIN JEE S. POSAS 12 -15 -2009 EMPLOYER/BUSINESS NAME MARCOS BAYBAY CITY, LEYTE BUSINESS ADDRESS TELEPHONE NO. NA 24. FATHER'S SURNAME **POSAS** NAME EXTENSION (JR., SR) LEODEGARIO FIRST NAME **BAGARINAO** MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME POSAS FIRST NAME **ROMANITA** (Continue on separate sheet if necessary) **BANTACULO** MIDDLE NAME **EDUCATIONAL BACKGROUND** SCHOLARSHIP HIGHEST LEVEL PERIOD OF ATTENDANCE ACADEMIC YEAR NAME OF SCHOOL BASIC FOUCATION/DEGREE/COURSE UNITS FARNED LEVEL GRADUATED HONORS (Write in full) (Write in full) (if not graduated) To From NONE PANGASUGAN ELEMENTARY SCHOOL ELEMENTARY GRADUATE 1977 1982 GRADUATED 1982 ELEMENTARY 1986 NONE **BUNGA NATIONAL HIGH SCHOOL** HIGH SCHOOL GRADUATE 1982 1986 GRADUATED SECONDARY VOCATIONAL / NONE 1986 1988 21 UNITS FOREST RANGER COURSE VISAYAS STATE COLLEGE OF AGRICULTURE TRADE COURSE COLLEGE **GRADUATE STUDIES** (Continue on separate sheet if necessary) YIVE CS FORM 212 (Revised 2017), Page 1 of 4 SIGNATURE DATE 2019

IV. CIV	IL SERVICE ELIGI	BILITY							
27. (CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable)		RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT PLACE OF EXAMINATION /		ATION / CONFERMENT		LICENSE (if a	Date of Validity
	i i								
							-		
	NA		NA	NA		NA		NA	NA
			(Co	ntinue on separate sheet	if necessary)				
	RK EXPERIENCE private employmen	t. Start from your recen	t work) Description	on of duties should b	e indicated in the attach	ed Work Ext	perience shee		
28. I	NCLUSIVE DATES (mm/dd/yyyy)	POSITION TI (Write in full/Do not a	TLE	DEPARTMENT / AGE	ENCY / OFFICE / COMPANY /Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format *00-0*)/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
From 2017	Present	ADM.AIDE	: III		President for Research	11,488/month	INCREMENT	REGULAR	YES
2003	Present	ADM. AIDI		Office of the Vice	Extension President for Research	10,000/month		REGULAR	YES
2004	Present	MESSENGE		Office of the Vice	Extension President for Research	8000/month		CASUAL	YES
1990	1993	LABORE	R		Extension A RESEARCH CENTER	800 /month		JOB ORDER	YES
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SI	GNATURE	Jispan		DATE	July 9,201	q	CS FORM 2	12 (Revised 2017), F	Page 2 of 4

VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVER		NAME OF THE PERSON NAMED IN	TART URGA	NIZATION/S	的现在分词的现在分词的现在分词的现在分词的
NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIV (mm/do		NUMBER OF HOURS		POSITION / NATURE OF WORK
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	(Continue on sepa	rate sheet if neces	sary)		
LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRA	INING PROGR	AMS ATTENL	DED		
rt from the most recent L&D/training program and include only the relevant L&D/train	ing taken for the la	st five (5) years fo	r Division Chief/E	Executive/Manageria	al positions)
	INCLUSIVE			Type of LD	
TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		DANCE d/yyyy)	NUMBER OF HOURS	(Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)
	From	То		Technical/etc)	
Region 8 CRADLE Workshop-writeshop	May 29, 2019	May 30, 2019	16 Hours		DOST-8
Target Setting and Project Proposal Crafting ticipating in the 26th Joint Vicarp and RRDEN Regional Research		March 14, 2019			EVCIEERD
relopment and Extension symposium	March 17, 2015	March 18, 2015	16 Hours		VICARP - RRDCC
9001 - 2008 Orientation & Writeshop Among Clerk & Secretaries	Sept. 21, 2015		8 Hours		ODAHRD
nder Sensitivety Training	Sept. 11,2014		8 Hours		
te and Rice- Based Technologies for Areas Affected by Super – Typhoon					ODAHRD
landa	May 20, 2014	May 27, 2014	64 Hours		PHILIPPINE RICE RESEARCH INSTITUTE
th Taking and Orientation of Newly Hired/Promoted Administrative Staff	July 29,2013		8 Hours	150	BIDANI
nsultation Planning – Workshop on Oporationalizing BIDANI as and	Oct. 22, 2012	Oct. 24, 2012	24 hours		
tension Program / Project Tool of the State University and College (SUCs)	000. 22, 2012	000.24,2012	L4 Hours		ODAHRD
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	(Continue on sep	parate sheet if nec	essary)		
III. OTHER INFORMATION					A Charles and Barding and Salah
31. SPECIAL SKILLS and HOBBIES 32.	NON-ACADEMIC D		COGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZA (Write in full)
VI. OI ESTAL CHILLE GIOTIOSSILO		(Write in full)			(Title in lon)
Short	r.	6 1 1			
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SIGNATURE TYM		DATE	70.1	79,2019	CS FORM 212 (Revised 2017), Page

a. a Have you ever been criminally charged before any court? Ves	34.	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediat Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Ca	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:			
## YES, give details: Date Filed: Status of Caseks:	35.	a. Have you ever been found guilty of any administrative of	If YES, give details: YES NO If YES, give details: Date Filed:			
3// 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 proteins sector? 3// Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? 3// Barangay election)? 3// Barangay election? 3// Barangay election? 3// Barangay election? 3// Barangay election? 3// Barangay election to promote detively campaign for a national or local candidate? 3// Barangay election to promote detively campaign for a national or local candidate? 3// Barangay election to promote detively campaign for a national or local candidate? 3// Barangay election? 4// Exs. give details: 3// Yes		b. Have you been criminally charged before any court?				
retrement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abilition) in the public or private sector? 38. a. Have you ever been a candidate in a national or local election held within the last year (except Barrangey 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? 92. Have you acquired the status of an immigrant or permanent resident of another country? 44. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magne Carta for Disabled Persons (RA 7277); and (c) Solo Parents Weltare Act of 2000 (RA 8972), please answer the following items: a Are you a member of any indepenous group? b. Are you a solo parent? c. Are you a solo parent? DR. OTHELLO B. CAPUNO VISCA BARBAY CITY, LEYTE DR. JOSE L. BACUSMO VISCA BARBAY CITY, LEYTE DR. JOSE L. BACUSMO VISCA BARBAY CITY, LEYTE DR. JOSE L. BACUSMO VISCA BARBAY CITY, LEYTE S63-7216 DR. JOSE L. BACUSMO VISCA BARBAY CITY, LEYTE S63-7216 DR. JOSE L. BACUSMO DR. JOSE L. BACUSMO VISCA BARBAY CITY, LEYTE S63-7216 DR. JOSE L. BACUSMO DR. JOSE L. BACUSM	36.					
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39. Have you acquired the status of an immigrant or permanent resident of another 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? 41. REFERENCES (Person not maked by consanguinty or affinity to applicant appointee) 42. Are you a solo parent? 43. REFERENCES (Person not maked by consanguinty or affinity to applicant appointee) 44. REFERENCES (Person not maked by consanguinty or affinity to applicant appointee) 45. ADDRESS TEL. NO. DR. OTHELLO B. CAPUNO VISCA BAYBAY CITY, LEYTE 563-7216 DR. EFREN B. SAZ VISCA BAYBAY CITY, LEYTE 563-7216 DR. EFREN B. SAZ VISCA BAYBAY CITY, LEYTE 563-1307 42. I declare under caff that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of perfinent laws, rules and regulations of the Republic of the Philippinss. I suthorize the agency head if authorized representative to verifyvalidate the contents stated herein. agree that any misrepresentation made in this document and its attachments shall cause the filling of administrative/criminal cases's against me. Government issued ID. VIDO418 DUILoansePassport No. 1903-97-028282 Duise Accomplished SUBSCRIBED AND SWORN to before me this JUL 0 9 July affiant exhibiting hisher validly issued government ID as indicated above.	38.	Barangay election)? b. Have you resigned from the government service during t	If YES, give details: NO			
Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? c. Are you a solo parent? 11 YES, please specify: we have a solo parent? 12 YES we have a solo parent? 13 NO we have a solo parent? 14. REFERENCES (Person not related by consanguinty or affinity to applicant (appointse) NAME ADDRESS TEL. NO. DR. OTHELLO B. CAPUNO VISCA BAYBAY CITY, LEYTE To parent pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filling of administrative/criminal case/s against me. 30 Signature (Sign inside the box) 07-03-2019 Date Place of Issuance: VSU, Visca Baybay City, Leyte SUBSCRIBED AND SWORN to before me this JU 0 9 Jg afficient exhibiting his/her validly issued government ID as indicated above. ATTAL PLACE On Minimal states and substitution of the provision of person and part of the provision of person and in this document and its attachments baball cause the filling of administrative/criminal case/s against me. 30 July Signature (Sign inside the box) 07-03-2019 Date Place of Issuance: VSU, Visca Baybay City, Leyte 31 July Signature (Sign inside the box) 07-03-2019 Date Place of Issuance: VSU, Visca Baybay City, Leyte 31 July Signature (Sign inside the box) 07-03-2019 Date Place of Issuance: VSU, Visca Baybay City, Leyte ATTAL PLACE ON Administrative Circlinal Significant exhibiting his/her validly issued government ID as indicated above.	39.		YES V NO			
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DR. OTHELLO B. CAPUNO VISCA BAYBAY CITY, LEYTE 563 8935 DR. JOSE L. BACUSMO VISCA BAYBAY CITY, LEYTE 563-7215 DR. EFREN B. SAZ VISCA BAYBAY CITY, LEYTE 563-1307 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 (to Passport, CSIS, SSS, PRC, Dher's Lionne, etc.) PLEASE INDICATE ID Number and Date of Issuance Government issued ID: V000418 ID/License/Passport No.: H03-97-028282 Date/Place of Issuance: VSU, Visca Baybay City, Leyte SUBSCRIBED AND SWORN to before me this JUI 0 9	41.	REFERENCES (Person not related by consanguinity or affinity to applica	int /appointee)			
DR. JOSE L. BACUSMO VISCA BAYBAY CITY, LEYTE 563-7215 DR. EFREN B. SAZ VISCA BAYBAY CITY, LEYTE 563-1307 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 filling of administrative/criminal case/s against me. Government Issued ID (In Passont, CSIS, SSS, PRC, Driver Libense, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: V000418 ID/License/Passport No.: H03-97-028282 Date/Place of Issuance: VSU, Visca Baybay City, Leyte Signature (Sign inside the box) 07-08-2019 Date Accomplished SUBSCRIBED AND SWORN to before me this JULE REPSON Administrating Oath		NAME	ADDRESS	TEL. NO.		
DR . EFREN B. SAZ VISCA BAYBAY CITY, LEYTE 563-1307 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 filling of administrative/criminal case/s against me. Government Issued ID: V000418 ID/License/Passport No.: HQ3-97-028282 Date/Piace of Issuance: VSU, Visca Baybay City, Leyte Sugnature (Sign inside the box) O7-08-2019 Date Accomplished SUBSCRIBED AND SWORN to before me this JUL 0 9		DR. OTHELLO B. CAPUNO	VISCA BAYBAY CITY, LEYTE	563 8935	136	
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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 (in Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: V000418 ID/License/Passport No.: H03-97-028282 Date/Place of Issuance: VSU, Visca Baybay City, Leyte Subscribed And Sworn to before me this JUT 0 9		DR . EFREN B. SAZ	VISCA BAYBAY CITY, LEYTE	563-1307		
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SUBSCRIBED AND SWORN to before me this	10	D/License/Passport No.: HO3-97-028282	x)			
ATTY. RYSAN C. GUINOCOR VSU LECRESON Administering Oath	D	late/Place of Issuance: VSU, Visca Baybay City, Leyte			Right Thumbmark	
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