

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	VALIDA		
FIRST NAME	ALBERTO		NAME EXTENSION (JR., SR) N/A
MIDDLE NAME	FERRER		
3. DATE OF BIRTH (mm/dd/yyyy)	10/25/1956	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	ABUYOG, LEYTE	If holder of dual citizenship, please indicate the details.	Philippines
5. SEX	<input checked="" type="checkbox"/> Male <input 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	Zone 1 House/Block/Lot No. Street Guadalupe Subdivision/Village Barangay Baybay City Leyte City/Municipality Province 6521-A
7. HEIGHT (m)	1.67		
8. WEIGHT (kg)	67.0	ZIP CODE	6521-A
9. BLOOD TYPE	"O"	18. PERMANENT ADDRESS	Zone 1 House/Block/Lot No. Street Guadalupe Subdivision/Village Barangay Baybay City Leyte City/Municipality Province 6521-A
10. GSIS ID NO.	LP-56102502642		
11. PAG-IBIG ID NO.	1700 0028 9384		
12. PHILHEALTH NO.	13-000069846-7	ZIP CODE	6521-A
13. SSS NO.	04-0833775-7	19. TELEPHONE NO.	563 1195
14. TIN NO.	104-770-841	20. MOBILE NO.	09127847894
15. AGENCY EMPLOYEE NO.	V000715	21. E-MAIL ADDRESS (if any)	albert_valida@yahoo.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	VALIDA		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	GINA	NAME EXTENSION (JR., SR)	ALJAY D VALIDA	2/20/1988
MIDDLE NAME	DARIA		ALGIN D VALIDA	1/16/1990
OCCUPATION	HOUSEWIFE		GELYN D VALIDA	1/30/1992
EMPLOYER/BUSINESS NAME	N/A		ALVIN D VALIDA	2/2/1993
BUSINESS ADDRESS	N/A		ANGELICA D VALIDA	6/25/1996
TELEPHONE NO.	N/A		ALMA D VALIDA	7/13/1999
24. FATHER'S SURNAME	VALIDA			
FIRST NAME	ANTONIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	VERRA			
25. MOTHER'S MAIDEN NAME				
SURNAME	FERRER			
FIRST NAME	ANTONINA			
MIDDLE NAME	DE GUZMAN			

(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	ABUYOG CENTRAL SCHOOL	PRIMARY EDUCATION	1964	1970	Certificate	1970	SALUTATORIAN
	SECONDARY	NOTRE DAME OF ABUYOG	HIGH SCHOOL	1970	1974	Diploma	1974	
	VOCATIONAL / TRADE COURSE	N/A						
	COLLEGE	VISAYAS STATE COLLEGE OF AGRICULTURE (now VSU)	BS AGRICULTURE	1975	1980	Diploma	1980	
	GRADUATE STUDIES	LEYTE STATE UNIVERSITY (now VSU)	MS AGRONOMY	1986	2004	Diploma	2004	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	June 7, 2021
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[illegible]

V. WORK EXPERIENCE

V. WORK EXPERIENCE

[illegible]

SIGNATURE	<i>[Signature]</i>		
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SIGNATURE	
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DATE _____

June 7, 2021


29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	N/A				

(Continue on separate sheet if necessary)




(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]

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Computer Literate (MS Word/Excel/PPT) with knowledge on powerpoint presentation	Loyalty Awardee (Ten Years)	VSU Alumni Association
		Administrative Personnel Association (ADPA)
SIGNATURE		DATE
		June 7, 2021

separate sheet if necessary)

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)?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?		<div><input checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details: _____Resignation, seek greener pasture</div>												
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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>												
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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)														
<table><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>Othello B. Capuno</td><td>Visayas State University, Baybay City</td><td>563-7064</td></tr><tr><td>Rodolfo G. Escalada</td><td>Visayas State University, Baybay City</td><td>563-2629</td></tr><tr><td>Rommel C. Armecin</td><td>Visayas State University, Baybay City</td><td>563-7012</td></tr></tbody></table>			NAME	ADDRESS	TEL. NO.	Othello B. Capuno	Visayas State University, Baybay City	563-7064	Rodolfo G. Escalada	Visayas State University, Baybay City	563-2629	Rommel C. Armecin	Visayas State University, Baybay City	563-7012
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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.														
<div>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: LP-56102502642</div> <div>ID/License/Passport No.:</div> <div>Date/Place of Issuance:</div>		<div></div> <div>Signature (Sign inside the box)</div> <div>June 7, 2021</div> <div>Date Accomplished</div>												
		<div></div> <div>Right Thumbmark</div>												
SUBSCRIBED AND SWORN to before me this <u>7/1/2021</u> , affiant exhibiting his/her validly issued government ID as indicated above.														
<div> ATTY. RYSZARD C. GUINOCOR VSAU Chief Legal Officer</div> <div>Person Administering Oath</div>														