

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	LINA		
FIRST NAME	SUZETTE	NAME EXTENSION (JR, SR) N/A	
MIDDLE NAME	BINONGO		
3. DATE OF BIRTH (mm/dd/yyyy)	9/6/1977	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	MAASIN SO. LEYTE	If holder of dual citizenship, please indicate the details.	<input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	Philippines	
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	PCARRD Housing-1 House/Block/Lot No. Street Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province 6521-A
7. HEIGHT (m)	1.56	18. PERMANENT ADDRESS	PCARRD Housing-1 House/Block/Lot No. Street BAYBAY LEYTE City/Municipality Province 6521-A
8. WEIGHT (kg)	79.5	19. TELEPHONE NO.	053-563-7652/053563-9949
9. BLOOD TYPE	"O"	20. MOBILE NO.	09199613922
10. GSIS ID NO.	B77T6SBB015	21. E-MAIL ADDRESS (if any)	sblina@vsu.edu.ph
11. PAG-IBIG ID NO.			
12. PHILHEALTH NO.	13-000047135-7		
13. SSS NO.	NA		
14. TIN NO.	919-695-951		
15. AGENCY EMPLOYEE NO.	V000295		

II. FAMILY BACKGROUND

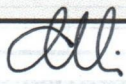
22. SPOUSE'S SURNAME	LINA	Name of Children (Write in Full Name and List all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	THOMAS GLENN	MIKAELA B. LINA	9/29/2004
MIDDLE NAME	ERLNADES	MEGAN B. LINA	4/3/2011
OCCUPATION	SELF-EMPLOYED		
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.	09669613908/0535639940		
24. FATHER'S SURNAME	BINONGO		
FIRST NAME	ALFREDO		
MIDDLE NAME	DUARTE		
25. MOTHER'S MAIDEN NAME			
SURNAME	BRAGAS		
FIRST NAME	MA. ASUNCION		
MIDDLE NAME	GALO		

(Continue on separate sheet if necessary)

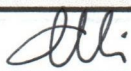
III. EDUCATIONAL BACKGROUND

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	TAWID ELEM. SCHOOL	PRIMARY EDUCATION	6/1/1984	3/30/1990	Graduated	1990	VALEDICTORIAN
SECONDARY	SAINT JOSEPH COLLEGE	HIGH SCHOOL	6/1/1990	3/30/1994	Graduated	1994	
VOCATIONAL / TRADE COURSE							
COLLEGE	VISAYAS STATE COLLEGE OF AGRICULTURE (Now VISAYAS STATE UNIVERSITY)	BACHELOR OF SCIENCE IN AGRICULTURE (SOIL SCIENCE)	6/1/1994	3/30/1998	Graduated	1998	CUM LAUDE
GRADUATE STUDIES	VISAYAS STATE COLLEGE OF AGRICULTURE (Now VISAYAS STATE UNIVERSITY)	MASTER IN SOIL SCIENCE	11/1/1998	5/30/2005	Graduated	2005	
	TOKYO UNIVERSITY OF AGRICULTURE AND TECHNOLOGY, TOKYO, JAPAN	PhD IN AGRICULTURE (SOIL SCIENCE)	10/3/2005	3/25/2009	Graduated	2009	WITH HIGH DISTINCTION
	UNIVERSITY OF GOETTINGEN, GOETTINGEN, GERMANY	POSTDOCTORATE	12/29/2011	10/25/2012	Graduated	NA	NA

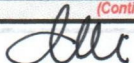
(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/17/2019	CS FORM 212 (Revised 2017), Page 1 of 4
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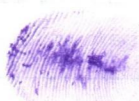

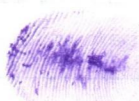

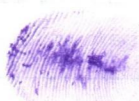
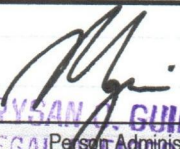
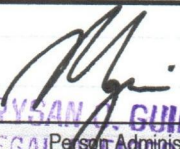
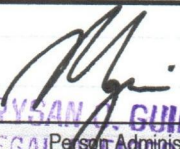


IV. CIVIL SERVICE ELIGIBILITY						
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)		
				NUMBER	Date of Validity	
CIVIL SERVICE ELIGIBLE	NA	PD 907	NA			
AGRICULTURIST	79.8	JUNE 1-3, 2015	TACLOBAN CITY	22692	6/30/2018	
(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.						
28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
From	To					
1/1/2017	PRESENT	ASSOC.PROFESSOR III	DSS, VISAYAS STATE UNIVERSITY	47779.00	P	YES
1/1/2017		ASSOCIATE PROFESSOR I	DSS, VISAYAS STATE UNIVERSITY	40227.00	P	YES
8/1/2016	12/31/2016	ASSOCIATE PROFESSOR I	DSS, VISAYAS STATE UNIVERSITY	37312.00	P	YES
1/1/2016	7/31/2016	ASSOCIATE PROFESSOR I	DSS, VISAYAS STATE UNIVERSITY	36409.00	T	YES
1/1/2016	7/31/2016	ASSOCIATE PROFESSOR I	DSS, VISAYAS STATE UNIVERSITY	37312.00	T	YES
11/1/2015	12/31/2015	ASSOCIATE PROFESSOR I	DSS, VISAYAS STATE UNIVERSITY	33859.00	T	YES
1/1/2015	10/31/2015	ASSOCIATE PROFESSOR I	DSS, VISAYAS STATE UNIVERSITY	33859.00	T	YES
6/1/2012	12/31/2014	INSTRUCTOR III	DASS, VISAYAS STATE UNIVERSITY	23044.00	T	YES
10/28/2011	5/31/2012	INSTRUCTOR III	DASS, VISAYAS STATE UNIVERSITY	21078.00	T	YES
6/1/2011	10/27/2011	INSTRUCTOR I	DASS, VISAYAS STATE UNIVERSITY	18333.00	T	YES
6/24/2010	5/31/2010	INSTRUCTOR I	DASS, VISAYAS STATE UNIVERSITY	16726.00	T	YES
7/15/2009	6/23/2010	INSTRUCTOR I	DASS, VISAYAS STATE UNIVERSITY	15119.00	T	YES
7/1/2009	7/14/2009	INSTRUCTOR I	DASS, VISAYAS STATE UNIVERSITY	15119.00	Co	YES
6/5/2009	6/30/2009	INSTRUCTOR I	DASS, VISAYAS STATE UNIVERSITY	13512.00	Co	YES
7/1/2008	10/31/2008	INSTRUCTOR I	DASS, VISAYAS STATE UNIVERSITY	13512.00	Co	YES
7/1/2007	6/30/2008	INSTRUCTOR I	DASS, VISAYAS STATE UNIVERSITY	12284.00	Co	YES
11/1/2005	6/30/2007	INSTRUCTOR I	DASS, LEYTE STATE UNIVERSITY	11167.00	Co	YES
11/1/2002	10/31/2005	INSTRUCTOR I	DASS, LEYTE STATE UNIVERSITY	11167.00	T	YES
11/1/2001	10/31/2002	INSTRUCTOR I	DASS, LEYTE STATE UNIVERSITY	11167.00	T	YES
7/1/2001	10/31/2001	INSTRUCTOR I	DASS, VISAYAS STATE COLLEGE OF AGRICULTURE	11167.00	T	YES
1/1/2000	6/30/2001	INSTRUCTOR I	DASS, VISAYAS STATE COLLEGE OF AGRICULTURE	10635.00	T	YES
12/1/1999	12/31/1999	INSTRUCTOR I	DASS, VISAYAS STATE COLLEGE OF AGRICULTURE	9668.00	T	YES
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	11/17/2019	CS FORM 212 (Revised 2017), Page 2 of 4



VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S						
29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK	
		From	To			
	VISCA EDUCATIONAL FOUNDATION INCORPORATED	6/24/2010	12/31/2011	8 HRS.MO	SECRETARY	
	GALILEAN UNITED METHODIST CHURCH PRE-SCHOOL INC	6/1/2016	4/30/2017	4 HRS/MO	GPTA-PRESIDENT	
	HOLY SPIRIT PARISH	1/1/2013	PRESENT	6HRS/MO	CAMPUS SERVICE GROUP LEADER	
	SOCIETY OF AGRICULTURAL EDUCATORS IN REGION 8, INC.	10/25/2015	6/24/2019	10 DAYS/YR	TREASURER	
	VISCA EDUCATIONAL FOUNDATION INCORPORATED	10/25/2019	PRESENT	4 HRS/MO	BOD (VICE-PRESIDENT)	
	STATE UNIVERSITIES & COLLEGES-ASSOCIATION OF COLLEGES OF AGRICULTURE IN THE PHILIPPINES, INC. (SUC-ACAP, INC)	7/26/2019	PRESENT	10 DAYS/YR	SECRETARY	
(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)						
30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	Short -Course Training and Workshop on Food Value Chain	10/7/2019	10/11/2019	40	Tech	Ministry of Agriculture Forestry & Fishery, ASEAN & Visayas State University
	Training workshop on lecture module preparation for open university program	4/21/2017	4/21/2017	8.0	Tech	Visayas State University Open Program Office
	Training-workshop on Research Innovation for Inclusive Development in the Visayas Region	5/23/2016	5/23/2016	8.0	Tech	National Research Council of the Philippines (NRCP)
	Vegetable Soil and Crop Nutrition Workshop	4/18/2016	4/29/2016	10 days	Tech/Supervisory	Australian Center for International Agricultural Research (ACIAR)
	National Conference on Food and Nutrition Security	10/12/2015	10/13/2015	2 days	Tech	University of the Philippines
	ACIAR PCAARRD Philippines Horticulture Program Annual Review Conference	8/13/2015	8/14/2015	2 days	Tech	Australian Center for International Agricultural Research (ACIAR)
	Sago Workshop	4/8/2014	4/10/2014	3 days	Tech	Philippine Council for Agriculture and Aquatic Natural Resources Research
	Workshop on Yamang Lupa Program in the Philippines	2 /12 /14	2 /21 /14	8 days	Tech/Supervisory	International Crop Research Institute of Science and Technology (ICRISAT),
	Workshop on Instructional Materials Development for the Visayas State University	1/28/2014	1/28/2014	8 hrs	Tech	Visayas State University
(Continue on separate sheet if necessary)						
VIII. OTHER INFORMATION						
31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)		
	NCT-II Organic Agriculture			PhiDelta Honor Society		
	NCT-III in Agricultural Crop Production			Philippine Society of Lactic Acid Bacteria		
	Soil and Plant Analysis Adept			Philippine Society of Soil Science and Technology		
	Computer Literate			VSU Alumni Association		
				Society of Agricultural Educator in Region 8		
				National Research Council of the Philippines		
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	11/17/2019	
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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)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____  <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____  <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)													
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>Dr. Victor B. Asio</td><td>DSS, Visca, Baybay City, Leyte</td><td>535637652</td></tr><tr><td>Dr. Anabella B. Tulin</td><td>Visca, Baybay City, Leyte</td><td>535637652</td></tr><tr><td> </td><td> </td><td> </td></tr></table>		NAME	ADDRESS	TEL. NO.	Dr. Victor B. Asio	DSS, Visca, Baybay City, Leyte	535637652	Dr. Anabella B. Tulin	Visca, Baybay City, Leyte	535637652			
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Dr. Anabella B. Tulin	Visca, Baybay City, Leyte	535637652											
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.													
<table><tr><td>Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</td></tr><tr><td>Government Issued ID: <b>PRC LICENCE-AGRICULTURIST</b></td></tr><tr><td>ID/License/Passport No.: <b>22692</b></td></tr><tr><td>Date/Place of Issuance: <b>JULY 1, 2015/PRC,TACLOBAN CITY</b></td></tr></table>	Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	Government Issued ID: <b>PRC LICENCE-AGRICULTURIST</b>	ID/License/Passport No.: <b>22692</b>	Date/Place of Issuance: <b>JULY 1, 2015/PRC,TACLOBAN CITY</b>	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td><b>11/17/2019</b></td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	<b>11/17/2019</b>	Date Accomplished				
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Right Thumbmark													
SUBSCRIBED AND SWORN to before me this <b>19 NOV 2019</b> , affiant exhibiting his/her validly issued government ID as indicated above.													
<table><tr><td></td></tr><tr><td><b>ATTY. NYSAN R. GUINOCOR</b></td></tr><tr><td>Person Administering Oath</td></tr></table>			<b>ATTY. NYSAN R. GUINOCOR</b>	Person Administering Oath									
													
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