

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 () ☐ 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	GONZAGA		
FIRST NAME	EDILBERTO	JR	
MIDDLE NAME	LABIAN		
3. DATE OF BIRTH (mm/dd/yyyy)	9/2/1980	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	GUADALUPE, BAYBAY, LEYTE	If holder of dual citizenship, please indicate the details.	
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	APT. 7 House/Block/Lot No. Street VSU CAMPUS Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	1.56	ZIP CODE	6521-A
8. WEIGHT (kg)	62		
9. BLOOD TYPE	"A+"	18. PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
10. GSIS ID NO.	CRN-021-1324-1379-7	ZIP CODE	
11. PAG-IBIG ID NO.	NONE		
12. PHILHEALTH NO.	13-050048508-7		
13. SSS NO.	NONE	19. TELEPHONE NO.	NONE
14. TIN NO.	932-301-399	20. MOBILE NO.	09168860048
15. AGENCY EMPLOYEE NO.	V000246	21. E-MAIL ADDRESS (if any)	edilberto.gonzaga@vsu.edu.ph

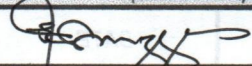
II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	GONZAGA	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	DEBIE LOUELLA	JEMIMA ABIGAIL U. GONZAGA	11/14/2006
MIDDLE NAME	UY	ED GABRIEL U. GONZAGA	05/19/2013
OCCUPATION	SELF-EMPLOYED		
EMPLOYER/BUSINESS NAME			
BUSINESS ADDRESS			
TELEPHONE NO.			
24. FATHER'S SURNAME	GONZAGA		
FIRST NAME	EDILBERTO	SR	
MIDDLE NAME	TAPAR		
25. MOTHER'S MAIDEN NAME			
SURNAME	LABIAN		
FIRST NAME	ADELINA		
MIDDLE NAME	CASABA		
(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	GUADALUPE ELEM. SCHOOL	DIPLOMA	1987	1993		1993	Salutatorian
SECONDARY	VISCA LABORATORY HIGH SCHOOL	DIPLOMA	1993	1997		1997	Partial Sch.
VOCATIONAL / TRADE COURSE	NONE						
COLLEGE	LEYTE STATE UNIVERSITY	B.S. STATISTICS	1997	2002		2002	None
GRADUATE STUDIES	LEYTE NORMAL UNIVERSITY	M.ED. MATHEMATICS	2011	2014		2014	None

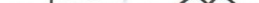
(Continue on separate sheet if necessary)

SIGNATURE		DATE	
-----------	-------------------------------------------------------------------------------------	------	--

[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		DATE	22 JUL 2010
-----------	-------------------------------------------------------------------------------------	------	-------------


[illegible]

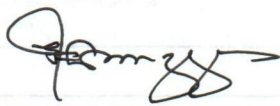
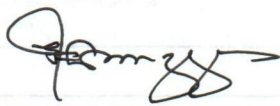
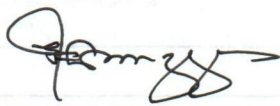
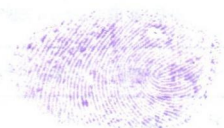
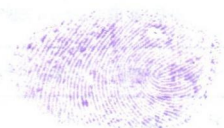
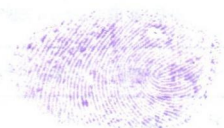
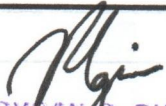
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED
(Start from the most recent L&D training program and include only the relevant L&D training taken for the last five (5) years for Division Chief/Executive Managerial positions)

[illegible]

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		
data analyst		
Playing chess		

SIGNATURE		DATE	
-----------	-------------------------------------------------------------------------------------	------	--

<p>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,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p>Date Filed: _____</p> <p>Status of Case/s: _____</p>												
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p>												
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p>												
<p>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:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p>												
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>DR. SHALOM GRACE C. SUGANO</td> <td>VSU CAMPUS, BAYBAY CITY, LEYTE</td> <td>09753403552</td> </tr> <tr> <td>DR. CHARIS B. LIMBO</td> <td>VSU CAMPUS, BAYBAY CITY, LEYTE</td> <td>09485105847</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	ADDRESS	TEL. NO.	DR. SHALOM GRACE C. SUGANO	VSU CAMPUS, BAYBAY CITY, LEYTE	09753403552	DR. CHARIS B. LIMBO	VSU CAMPUS, BAYBAY CITY, LEYTE	09485105847			
NAME	ADDRESS	TEL. NO.											
DR. SHALOM GRACE C. SUGANO	VSU CAMPUS, BAYBAY CITY, LEYTE	09753403552											
DR. CHARIS B. LIMBO	VSU CAMPUS, BAYBAY CITY, LEYTE	09485105847											
<p>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.</p>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td colspan="2">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID:</td> <td>V000246</td> </tr> <tr> <td>ID/License/Passport No.:</td> <td> </td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>07/01/2010 / VSU</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:	V000246	ID/License/Passport No.:		Date/Place of Issuance:	07/01/2010 / VSU	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">  Signature (Sign inside the box) </td> </tr> <tr> <td style="text-align: center;"> _____ Date Accomplished </td> </tr> </table>	 Signature (Sign inside the box)	_____ Date Accomplished
Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)													
PLEASE INDICATE ID Number and Date of Issuance													
Government Issued ID:	V000246												
ID/License/Passport No.:													
Date/Place of Issuance:	07/01/2010 / VSU												
 Signature (Sign inside the box)													
_____ Date Accomplished													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">  Right Thumbmark </td> </tr> </table>		 Right Thumbmark											
 Right Thumbmark													
<p>SUBSCRIBED AND SWORN to before me this <u>17 JAN 2020</u>, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="text-align: center;">  ATTY. RYSAN C. GUINOCOR VSU LEGAL OFFICER Person Administering Oath </div>													

WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied for.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed starting with the most recent/present employment

Sample: If applying to Supervising Administrative Officer

- Duration: June 16, 2010 – present
- Position: Instructor II
- Name of Office/Unit: VSU Integrated High School
- Immediate Supervisor: Dr. Shalom Grace C. Sugano
- Name of Agency/Organization and Location: VSU, Visca, Baybay City, Leyte

- List of Accomplishments and Contributions (if any)

- Summary of Actual Duties
 - Responsible for instruction in VSU Integrated High School. Develop instructional material. Provide intervention when needed. Conduct research and present the findings in national and international platforms. Publish research findings.

- Duration: June 16, 2019 – present
- Position: Instructor II
- Name of Office/Unit: VSU Integrated High School
- Immediate Supervisor: Dr. Shalom Grace C. Sugano
- Name of Agency/Organization and Location: VSU, Visca, Baybay City, Leyte

- List of Accomplishments and Contributions (if any)

- Summary of Actual Duties
 - Responsible for instruction in VSU Integrated High School. Develop instructional material. Provide intervention when needed. Conduct research and present the findings in national and international platforms. Publish research findings


EDILBERTO L. GONZAGA, JR.

(Signature over Printed Name
of Employee/Applicant)

Date: _____