

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	BARBADILLO		
FIRST NAME	MARK ANTHONY	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	MANATAD		
3. DATE OF BIRTH (mm/dd/yyyy)	JULY 08, 1996	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	HILONGOS, 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 checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	N/A House/Block/Lot No. Street N/A EASTERN POBLACION Subdivision/Village Barangay HILONGOS LEYTE City/Municipality Province
7. HEIGHT (m)	1.768	ZIP CODE	6524
8. WEIGHT (kg)	65		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	N/A House/Block/Lot No. Street N/A EASTERN POBLACION Subdivision/Village Barangay HILONGOS LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6524
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	N/A	19. TELEPHONE NO.	N/A
13. SSS NO.	N/A		
14. TIN NO.	711-156-124-000	20. MOBILE NO.	09452244589 / 09264475221
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	markyanthon.barbz@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A	N/A	N/A
MIDDLE NAME	N/A		N/A	N/A
OCCUPATION	N/A		N/A	N/A
EMPLOYER/BUSINESS NAME	N/A		N/A	N/A
BUSINESS ADDRESS	N/A		N/A	N/A
TELEPHONE NO.	N/A		N/A	N/A
24. FATHER'S SURNAME	BARBADILLO		N/A	N/A
FIRST NAME	EFREN	NAME EXTENSION (JR., SR) N/A	N/A	N/A
MIDDLE NAME	CAMIA		N/A	N/A
25. MOTHER'S MAIDEN NAME	AVELINA MANATAD RABE		N/A	N/A
SURNAME	RABE		N/A	N/A
FIRST NAME	AVELINA		N/A	N/A
MIDDLE NAME	MANATAD		(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	HILONGOS SOUTH CENTRAL SCHOOL (HSCE)	N/A	2003	2009	GRADUATE	2009	1ST HONOR
SECONDARY	HILONGOS NATIONAL VOCATIONAL SCHOOL (HNVS)	BUILDING CONSTRUCTION	2009	2013	GRADUATE	2013	3TH HONORABLE MENTION
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY (VSU) - MAIN CAMPUS	BACHELOR OF SCIENCE IN AGRICULTURE (SOIL SCIENCE)	2013	2017	GRADUATE	2017	MAGNA CUM LAUDE
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY (VSU) - MAIN CAMPUS	SOIL SCIENCE (TROPICAL ECOLOGY - MINOR COURSE)	2017	2019	GRADUATE	2019	DOST SCHOLAR

(Continue on separate sheet if necessary)

SIGNATURE		DATE	July 15, 2020
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[illegible]

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	July 15, 2020

[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)
Reading	N/A	N/A
Poetic writing	N/A	N/A

SIGNATURE		DATE	July 15, 2020
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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)?

☐ YES☒ NO

☐ YES☒ 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?

☐ YES☒ NO

☐ YES☒ 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?

☐ YES☒ 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?

☐ YES☒ 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?

☐ YES☒ NO

If YES, give details:

☐ YES☒ NO

If YES, give details:

39. Have you acquired the status of an immigrant or permanent resident of another country?

☐ YES☒ 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?

☐ YES☒ NO

If YES, please specify:

☐ YES☒ NO

If YES, please specify ID No:

☐ YES☒ NO

If YES, please specify ID No:

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
Dr. Romel B. Armeclin	VSU, Baybay City, Leyte	9173108074
Dr. Marjohn C. Nino	VSU, Baybay City, Leyte	9206473204
Dr. Suzette B. Lina	VSU, Baybay City, Leyte	9199613922

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 (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)
PLEASE INDICATE ID Number and Date of Issuance

Government Issued ID: CSC Eligibility Card (100108170763)

ID/License/Passport No.: N/A

Date/Place of Issuance: 06/24/17 - VSU Main

Signature (Sign inside the box)

July 15, 2020

Date Accomplished

Right Thumbmark

SUBSCRIBED AND SWORN to before me this 07 AUG 2020, affiant exhibiting his/her validly issued government ID as indicated above.

ATTY. RYAN C. GUINOCOR
VSU LEGAL OFFICER

Person Administering Oath

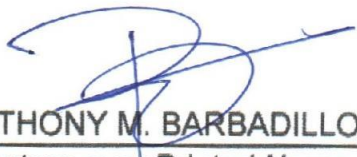
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WORK EXPERIENCE SHEET

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

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 from most recent first.

- Duration: August 1, 2019 – present
- Position: Instructor I
- Name of Office/Unit: Department of Soil Science
- Immediate Supervisor: Suzette B. Lina
- Name of Agency/Organization and Location: Department of Soil Science, VSU, Baybay City, Leyte
- List of Accomplishments and Contributions (if any)
 - Held classes for one year
 - Got involved in Department's extension service
 - Attended trainings and seminars relevant to department's development
- Summary of Actual Duties
 - Responsible in teaching and performing all relevant activities of the Department, including extension activities relevant for the department's development


MARK ANTHONY M. BARBADILLO
(Signature over Printed Name
of Employee/Applicant)

Date: July 15, 2020