

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	Casinillo		
FIRST NAME	Leomarich	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	Fortugaliza		
3. DATE OF BIRTH (mm/dd/yyyy)	02/01/1990	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: Philippines
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 type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:		
7. HEIGHT (m)	1.52	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street Cabahug's apartment Santiago Subdivision/Village Barangay Iligan City Lanao del Norte City/Municipality Province
8. WEIGHT (kg)	58	ZIP CODE	6521
9. BLOOD TYPE	O+	18. PERMANENT ADDRESS	House/Block/Lot No. Street Tabunok Subdivision/Village Barangay Hilongos Leyte City/Municipality Province
10. GSIS ID NO.	2005147216	ZIP CODE	6524
11. PAG-IBIG ID NO.	121197936123	19. TELEPHONE NO.	N/A
12. PHILHEALTH NO.	32019881419	20. MOBILE NO.	09302450157
13. SSS NO.	N/A	21. E-MAIL ADDRESS (if any)	leomarich.casinillo@vsu.edu.ph
14. TIN NO.	425-775-488		
15. AGENCY EMPLOYEE NO.	V00957		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	Casinillo	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	Emily	NAME EXTENSION (JR., SR) N/A	Gia Gabrielle L. Casinillo
MIDDLE NAME	Lagumbay		11/11/2020
OCCUPATION	Teaching		
EMPLOYER/BUSINESS NAME	Visayas State Univesity		
BUSINESS ADDRESS	Visca, Baybay City Leyte		
TELEPHONE NO.	N/A		
24. FATHER'S SURNAME	Casinillo		
FIRST NAME	Leonardo	NAME EXTENSION (JR., SR)	
MIDDLE NAME	Vasquez		
25. MOTHER'S MAIDEN NAME	Maita Rola Fortugaliza		
SURNAME	Casinillo		
FIRST NAME	Maita		
MIDDLE NAME	Fortugaliza		

(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	BRGY. TABUNOK ELEMENTARY SCHOOL	Primary Education	1997	2003		2003	
SECONDARY VOCATIONAL/ TRADE COURSE	HILONGOS NATIONAL VOCATIONAL SCHOOL	Secondary Education	2003	2007		2007	
COLLEGE	VISAYAS STATE UNIVERSITY	Bachelor of Science in Statistics	2009	2012		2012	
GRADUATE STUDIES	UNIVERSITY OF SAN CARLOS	Master of Science in Mathematics	2014	2017		2017	
	VISAYAS STATE UNIVERSITY	Master of Science in Ag. Economics	2017	2019		2019	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	4/22/2024
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[illegible]


(Continue on separate sheet if necessary)


V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	4/22/2024
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SIGNATURE		DATE	4/22/2024
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SIGNATURE		DATE	4/22/2024
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29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	N/A	N/A	N/A	N/A	N/A

[illegible]

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
N/A	N/A	Mathematical Society of the Philippines
		Mathematics Teacher Association of the Philippines - Tertiary Level
		Visayas State University Faculty Association

(Continue on separate sheet if necessary)

L. K. 11

4/22/2024

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?

☐ YES

☒ NO

If YES, give details:

b. Have you been criminally charged before any court?

☐ 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)?

☐ YES

☒ NO

If YES, give details:

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:

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?

☐ YES

☒ NO

If YES, please specify:

b. Are you a person with disability?

☐ YES

☒ NO

If YES, please specify ID No

c. Are you a solo parent?

☐ YES


☒ NO

If YES, please specify ID No


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

NAME	ADDRESS	TEL. NO.
Jorge S. Valenzona	Visca, Baybay City Leyte	
Moises Neil V. Serioño	Visca, Baybay City Leyte	
Eusebio R. Lina	Visca Baybay City Leyte	09293697060

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.



LEONMARICH F. CASINILLO




Right Thumbmark

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

Government Issued ID: Voter's ID

ID/License/Passport No.: 3719-0170A-B0190LFC10000

Date/Place of Issuance: Hilongos Leyte

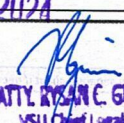


Signature (Sign inside the box)

4/22/2024

Date Accomplished

SUBSCRIBED AND SWORN to before me this 10 MAY 2024, affiant exhibiting his/her validly issued government ID as indicated above.



ATTY. RYAN C. GUIOACOR

YSU Ombudsman Legal Officer

Person Administering Oath

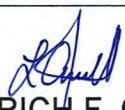
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WORK EXPERIENCE SHEET

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: January 3, 2023 - present
- Position: Assistant Professor II
- Name of Office/Unit: Department of Mathematics
- Immediate Supervisor: Dr. Eusebio R. Lina, Jr.
- Name of Agency/Organization and Location: Department of Mathematics, Visayas State University, Baybay City, Leyte
- Summary of Actual Duties
 - On study-leave.
 - a. Enrolled subjects as projected in the proposed study plan.
 - b. Passed all enrolled subjects.
 - Performs other functions, among others:
 - a. Performs functions relative to committee memberships and other ad hoc assignments including related to quality assurance and other accreditation functions
 - b. Performs other functions assigned by the department head, College Dean, Vice Presidents and the University President
- Duration: January 24, 2017 - January 2, 2023
- Position: Instructor I
- Name of Office/Unit: Department of Mathematics
- Immediate Supervisor: Dr. Eusebio R. Lina, Jr.
- Name of Agency/Organization and Location: Department of Mathematics, Visayas State University, Baybay City, Leyte
- Summary of Actual Duties
 - Teaches assigned subjects and performs other teaching related functions; among others, the following:
 - b. Prepares and revised teaching materials/guides and submit to department head
 - c. Prepares and gives examinations (mid/final/long/quizzes)
 - d. Checks test papers and returns to students one week after examination
 - e. Submits grade sheets within prescribed period to the Registrar through the department
 - f. Turns over class records to department heads within two weeks after final examination
 - g. Makes himself available for consultation by his/her students during scheduled consultation hours
 - Performs research and/or extension functions; among others the following:
 - a. Prepares research/extension proposals
 - b. Implements duly approved research/extension projects within time frame
 - c. Prepares and prepares reports within the prescribed period
 - d. Presents research/extension outputs during conferences/fora of legitimate professional organizations
 - e. Submits output for possible publication/patenting
 - Performs other functions, among others:
 - a. Performs functions relative to committee memberships and other ad hoc assignments including related to quality assurance and other accreditation functions
 - b. Performs other functions assigned by the department head, College Dean, Vice Presidents and the University President


LEOMARICH F. CASINILLO
 (Signature over Printed Name
 of Employee/Applicant)

Date: 4/22/2024