

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	BATIDOR				
FIRST NAME	PAULO				NAME EXTENSION (JR., SR)
MIDDLE NAME	GONZAGA				
3. DATE OF BIRTH (mm/dd/yyyy)	4/30/1995	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <div> <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization </div> Pls. indicate country:		
4. PLACE OF BIRTH	Isabel, 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"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	Pasil House/Block/Lot No. Street Bilwang Subdivision/Village Barangay Isabel Leyte City/Municipality Province		
7. HEIGHT (m)	1.60	ZIP CODE	6539		
8. WEIGHT (kg)	59.7				
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	Pasil House/Block/Lot No. Street Bilwang Subdivision/Village Barangay Isabel Leyte City/Municipality Province		
10. GSIS ID NO.	2005283365	ZIP CODE	6539		
11. PAG-IBIG ID NO.	121207172875				
12. PHILHEALTH NO.	130001237102				
13. SSS NO.	None	19. TELEPHONE NO.	None		
14. TIN NO.	340570878	20. MOBILE NO.	09065442887		
15. AGENCY EMPLOYEE NO.	V00934	21. E-MAIL ADDRESS (if any)	paulo.batidor@vsu.edu.ph		

II. FAMILY BACKGROUND				
22. SPOUSE'S SURNAME	NA		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	NA	NAME EXTENSION (JR., SR)	NA	NA
MIDDLE NAME	NA		NA	NA
OCCUPATION	NA		NA	NA
EMPLOYER/BUSINESS NAME	NA		NA	NA
BUSINESS ADDRESS	NA		NA	NA
TELEPHONE NO.	NA		NA	NA
24. FATHER'S SURNAME	Batidor		NA	NA
FIRST NAME	Galicano	NAME EXTENSION (JR., SR)	NA	NA
MIDDLE NAME	Wenceslao		NA	NA
25. MOTHER'S MAIDEN NAME			NA	NA
SURNAME	Gonzaga		NA	NA
FIRST NAME	Desedelia		NA	NA
MIDDLE NAME	Camugao		(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	Bilwang Elementary School	NA	6/1/2003	3/31/2009	Graduated	2009	Valedictorian
SECONDARY	Matlang National High School	NA	6/1/2009	3/31/2013	Graduated	2013	Valedictorian
VOCATIONAL / TRADE COURSE	NA	NA					
COLLEGE	Visayas State University	Bachelor of Science in Statistics	6/1/2013	6/14/2017	Graduated	2017	DOST-SEI/ Magna cum laude
GRADUATE STUDIES	Hasselt University	Masters in Statistics	9/16/2019	Present	NA	NA	VLIR-UOS


SIGNATURE		DATE	06/20/2020		CS FORM 212 (Revised 2017), Page 1 of 4
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[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]

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	06/29/2020
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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		
NA					

(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			
	Seminar-Workshop on Community Entry and Needs Assessment	1/12/2019		8.0	Technical	Visayas State University
	Training Workshop on Selected Quantitative Methods for Project Impact Evaluation	1/7/2019	1/11/2019	40.0	Technical	Visayas State University
	Train the Trainers Program	1/10/2018	1/13/2018	32.0	Technical	Philippine Statistical Research and Training Institute
	Seminar-Workshop on Classification and Regression Trees	12/4/2017	12/6/2017	24.0	Technical	University of the Philippines and Philippine Statistical Association Central Visayas, Inc.
	Training-Workshop on Writing Scientific Paper for Peer-Reviewed Publication	10/16/2017	10/18/2017	24.0	Technical	Visayas State University
	2018 MTAP-TL Annual Convention	7/27/2017	7/29/2017	24.0	Technical	Mathematics Teachers Association of the Philippines Tertiary Level, Inc.

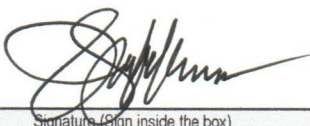

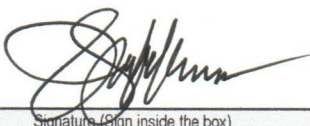

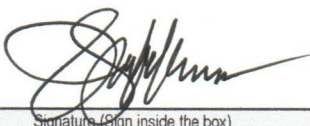

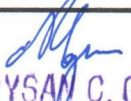
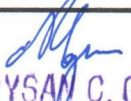
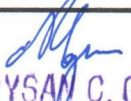
(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Knows how to use statistical softwares (R, STATA, SPSS)		NA		Mathematics Teachers Association of the Philippines-Tertiary Level
					VSU Faculty Association
					Philippine Statistical Association Central Visayas, Inc.

(Continue on 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)?	<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><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>Dr. Jacqueline M. Guarte</td><td>Visca Baybay City, Leyte</td><td>09164057852</td></tr><tr><td>Dr. Norberto E. Milla</td><td>Visca Baybay City, Leyte</td><td>09358590890</td></tr><tr><td></td><td></td><td></td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	Dr. Jacqueline M. Guarte	Visca Baybay City, Leyte	09164057852	Dr. Norberto E. Milla	Visca Baybay City, Leyte	09358590890			
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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.													
<table><tr><td colspan="2">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:</td><td>V01020</td></tr><tr><td>ID/License/Passport No.:</td><td></td></tr><tr><td>Date/Place of Issuance:</td><td>08/01/17</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:	V01020	ID/License/Passport No.:		Date/Place of Issuance:	08/01/17	<table><tr><td> Signature (Sign inside the box) 08/24/2020 Date Accomplished</td><td> Right Thumbmark</td></tr></table>	 Signature (Sign inside the box) 08/24/2020 Date Accomplished	 Right Thumbmark		
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SUBSCRIBED AND SWORN to before me this <u>08 JUL 2020</u> affiant exhibiting his/her validly issued government ID as indicated above.													
<table><tr><td> ATTY. RYSAN C. GUINOCOR VSO LEGAL OFFICER Person Administering Oath</td></tr></table>		 ATTY. RYSAN C. GUINOCOR VSO LEGAL OFFICER Person Administering Oath											
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