

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	MAMASIG		
FIRST NAME	ELIZABETH	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	TAMONDONG		
3. DATE OF BIRTH (mm/dd/yyyy)	10/16/1991	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	PINAMPOAN, CAPOOCAN, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s: <input checked="" type="checkbox"/> Married <input type="checkbox"/> Separated	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
7. HEIGHT (m)	1.48	ZIP CODE	6531
8. WEIGHT (kg)	45		
9. BLOOD TYPE	B	18. PERMANENT ADDRESS	House/Block/Lot No. Street Subdivision/Village Barangay City/Municipality Province
10. GSIS ID NO.	2005193590	ZIP CODE	6531
11. PAG-IBIG ID NO.	121159433269		
12. PHILHEALTH NO.	02-050893937-0	19. TELEPHONE NO.	NONE
13. SSS NO.	34-3377953-6	20. MOBILE NO.	09164321071
14. TIN NO.	426-529-668-000	21. E-MAIL ADDRESS (if any)	beth.mamasig@gmail.com
15. AGENCY EMPLOYEE NO.	N/A		

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
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	MAMASIG			
FIRST NAME	BENITO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	ESTORIL			
25. MOTHER'S MAIDEN NAME				
SURNAME	TAMONDONG			
FIRST NAME	HELEN			
MIDDLE NAME	AUSTRIA			

(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	KANANGA CENTRAL SCHOOL	ELEMENTARY	1998	2004		2004	ACHIEVER
SECONDARY	KANANGA NATIONAL HIGH SCHOOL	SECONDARY	2004	2008		2008	
VOCATIONAL / TRADE COURSE	N/A						
COLLEGE	SYSTEMS TECHNOLOGY INSTITUTE-COLLEGE	BACHELOR OF SCIENCE IN COMPUTER SCIENCE	2008	2012		2012	CUM LAUDE
GRADUATE STUDIES	EASTERN VISAYAS STATE UNIVERSITY	MASTERS IN SCIENCE IN INFORMATION TECHNOLOGY	2015	2019		2019	

(Continue on separate sheet if necessary)

SIGNATURE		DATE	1/20/20
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IV. CIVIL SERVICE ELIGIBILITY

[illegible]

(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.

[illegible]

(Continue on separate sheet if necessary)

SIGNATURE		DATE	1/20/20
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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
NONE					

(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			
	A WORKSHOP/ SEMINAR on PYTHON and DJANGO PROGRAMMING: A WEB DEVELOPMENT TOOL	3/3/2018	3/4/2018	16	RESOURCE SPEAKER	HOLYCROSS COLLEGE, CARIGARA, LEYTE
	HUMAN COMPUTER INTERACTION SEMINAR-WORKSHOP	2/72018	2/9/2018	24		PHILIPPINE SOCIETY OF IT EDUCATORS, VSU, BAYBAY
	PYTHON PROGRAMMING TRAINING	11/6/2017	11/10/2017	40		DEPARTMENT OF SCIENCE & TECHNOLOGY, ACLC, TACLOBAN CITY
	ADVANCED ANDROID APPLICATION DEVELOPMENT	7/1/2017	7/3/2017	24		PHILNITS, PAWING PALO, LEYTE
	SPECIAL TRAINING FOR BUSINESS ANALYTICS	4/17/2017	4/28/2017	80		COMMISSION ON HIGHER EDUCATION & VISAYAS STATE UNIVERSITY, CEBU INSTITUTE OF TECHNOLOGY, CEBU CITY
	MYSQL AND PHP TRAINING	3/6/2017	3/8/2017	24	RESOURCE SPEAKER	HOLYCROSS COLLEGE, CARIGARA, LEYTE
	PREPARING CYBERSECURITY EDUCATORS OF REGION VIII	9/3/2016	9/4/2016	16		PHILIPPINE SOCIETY OF IT EDUCATORS, CALBAYOG, SAMAR
	GAME DEVELOPMENT TRAINING	10/23/2015	10/25/2015	27		EASTERN VISAYAS FEDERATION FOR INFORMATION TECHNOLOGY, PALO, LEYTE
	REGIONAL ASSEMBLY OF THE PHILIPPINE ASSOCIATION FOR GRADUATE EDUCATION	8/29/2015	8/29/2015	8		PHILIPPINE ASSOCIATION FOR GRADUATE EDUCATION(PAGE), REMEDIOS TRINIDAD ROMUALDEZ MEDICAL FOUNDATION, TACLOBAN CITY
	SEMINAR-WORKSHOP FOR THE NEWLY HIRED FACULTY	6/13/2013	6/14/2013	16		VISAYAS STATE UNIVERSITY, BAYBAY LEYTE
	CAREER DEVELOPMENT SEMINAR	4/9/2012	4/9/2012	8		STI-COLLEGE, ORMOC CITY
	BASIC 3D MODELING AND SIMULATION	1/28/2011	1/29/2011	16		SYSTEMS TECHNOLOGY INSTITUTE, ORMOC CITY
	BASIC COMPUTER TROUBLESHOOTING	10/24/2009	10/24/2009	8		SYSTEMS TECHNOLOGY INSTITUTE, ORMOC CITY










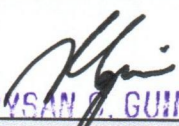
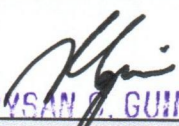
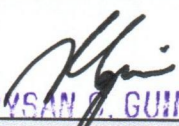
(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	TECHNICAL SKILLS		N/A		PSITE VIII
					PAGE 8

(Continue on separate sheet if necessary)

SIGNATURE		DATE	11/20/20
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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><thead><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr></thead><tbody><tr><td>PROF. WINSTON M. TABADA</td><td>VSU, VISCA, BAYBAY, LEYTE</td><td>053-335-2120</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	PROF. WINSTON M. TABADA	VSU, VISCA, BAYBAY, LEYTE	053-335-2120						
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PROF. WINSTON M. TABADA	VSU, VISCA, BAYBAY, LEYTE	053-335-2120											
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: PHILHEALTH</td></tr><tr><td>ID/License/Passport No.: 02-050893937-0</td></tr><tr><td>Date/Place of Issuance:</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: PHILHEALTH	ID/License/Passport No.: 02-050893937-0	Date/Place of Issuance:	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>11/26/20</td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	11/26/20	Date Accomplished				
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SUBSCRIBED AND SWORN to before me this 03 FEB 2020 , affiant exhibiting his/her validly issued government ID as indicated above.													
<table><tr><td> ATTY. RUSAN S. GUINOCOR VSULEGAL OFFICER Person Administering Oath</td></tr></table>		 ATTY. RUSAN S. GUINOCOR VSULEGAL OFFICER Person Administering Oath											
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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

Position Applied:

- Duration: Apr. 2017 – Present
- Position: Instructor I
- Name of Office/Unit: DCST
- Immediate Supervisor: Prof. Winston M. Tabada
- Name of Agency/Organization and Location: VSU
- List of Accomplishments and Contributions (if any)
 - Revised CSci 11 course syllabus into an OBTL format
 - Create ESci 126c course syllabus, slide presentation and lecture notes.
 - Create CSci 122 course syllabus, slide presentation and lecture notes.
 - Revised CS21 course syllabus into an OBE, Washington Accord format
- Summary of Actual Duties
 - Responsible for teaching assigned subjects and perform other teaching related functions which includes preparing and revising teaching materials/guides, prepare and give examinations, check test papers, submit grade sheets within prescribe period to the Registrar through the department, conduct consultation during available time to the students and perform other functions assigned by the department head, College Dean, Vice Presidents and the University President.

Position Applied:

- Duration: Jun. 2013 – March 2017
- Position: Part-time Instructor
- Name of Office/Unit: DCST
- Immediate Supervisor: Prof. Winston M. Tabada
- Name of Agency/Organization and Location: VSU
- List of Accomplishments and Contributions (if any)
 - Revised CS22 course manual and course syllabus into an OBTL format.
- Summary of Actual Duties
 - Responsible for teaching assigned subjects and perform other teaching related functions which includes preparing and revising teaching materials/guides, prepare and give examinations, check test papers, submit grade sheets within prescribe period to the Registrar through the department, conduct consultation during available time to the students and perform other functions assigned by the department head, College Dean, Vice Presidents and the University President.


 ELIZABETH T. MAMASIG
(Signature over Printed Name
of Employee/Applicant)Date: 1/20/20

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