

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	CRUZ		
FIRST NAME	MARIA TERESA	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ACO	N/A	
3. DATE OF BIRTH (mm/dd/yyyy)	1/15/1968	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship
4. PLACE OF BIRTH	Tayabas, Quezon	If holder of dual citizenship, please indicate the details.	<input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		Pls. indicate country:
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	Philippines
7. HEIGHT (m)	1.59	#107 Warner Apts Kilbourn	
8. WEIGHT (kg)	60	House/Block/Lot No. Street	
9. BLOOD TYPE	B-	VisCA Pangasugan	
10. GSIS ID NO.	BP #2001712060	Subdivision/Village Barangay	
11. PAG-IBIG ID NO.	1700-0032-0078	Baybay Leyte	
12. PHILHEALTH NO.	1305-0062-0693	City/Municipality Province	
13. SSS NO.	03-9016340-8	ZIP CODE 6521	
14. TIN NO.	135 546 153	18. PERMANENT ADDRESS	
15. AGENCY EMPLOYEE NO.	V000166	Lot 2A-4A St. Peter	
		House/Block/Lot No. Street	
		Perpetual Village II Pulanglupa Dos	
		Subdivision/Village Barangay	
		Las Piñas NCR	
		City/Municipality Province	
		ZIP CODE 1740	
		19. TELEPHONE NO.	053 563 8641
		20. MOBILE NO.	0926 303 7907
		21. E-MAIL ADDRESS (if any)	mariateresa.cruz@vsu.edu.ph

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)	Robert Angelo C. Cacerias	2/14/1993
MIDDLE NAME	N/A		Julian Charles Zachery C. Cacerias	2/18/1998
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	CRUZ (deceased)			
FIRST NAME	ARMANDO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	MARTIN			
25. MOTHER'S MAIDEN NAME				
SURNAME	ACO			
FIRST NAME	CRESENCIANA			
MIDDLE NAME	AQUITANIA		(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	ST PAUL COLLEGE OF PARAÑAQUE	PRIMARY EDUCATION	1974	1980		1980	
SECONDARY	ST PAUL COLLEGE OF PARAÑAQUE	HIGH SCHOOL	1980	1984		1984	
COLLEGE	ST. PAUL UNIVERSITY MANILA former ST PAUL COLLEGE OF MANILA	BACHELOR OF SCIENCE IN COMMERCE MAJOR IN ACCOUNTING	1984	1988		1988	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF MANAGEMENT	2ndSem 2015	present	24 units		

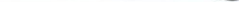
(Continue on separate sheet if necessary)	
SIGNATURE	DATE
	April 20, 2017

[illegible]

V. WORK EXPERIENCE
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	April 20, 2017

SIGNATURE		DATE	April 20, 2017
-----------	---	------	----------------

April 20, 2017

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON- 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		
	N/A				

(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)

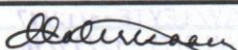
30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	MARKETING MANAGEMENT	3/19/2017	3/19/2017	8.0	Technical	DEPARTMENT OF BUSINESS AND MANAGEMENT & VISAYAS STATE UNIVERSITY
	OVPAF STRATEGIC PLANNING WORKSHOP	2/15/2017	2/16/2017	16.0	Technical	VISAYAS STATE UNIVERSITY
	FULL AWARENESS TRAINING COURSE ISO 9001:2015	1/26/2017	1/27/2017	16.0	Technical	AJA REGISTRARS, INC.
	REVISED CHART OF ACCOUNTS - NATIONAL	8/1/2016	8/5/2016	40.0	Technical	COMMISSION ON AUDIT
	1ST PAGBA QUARTERLY SEMINAR 2016 "STEERING AND MANAGING PFM /GOVERNANCE REFORMS IN THE TRANSITION YEAR"	3/30/2016	4/2/2016	24.0	Technical	PHILIPINE ASSOCIATION FOR GOVERNMENT BUDGET ADMINISTRATION (PAGBA, INC)
	3rd PAGBA QUARTERLY SEMINAR "PLANNING, BUDGETING, EXECUTION AND MONITORING FOR RESULTS - PILLARS OF A STRONG PUBLIC FINANCIAL MANAGEMENT"	11/4/2015	11/7/2015	24.0	Technical	PHILIPINE ASSOCIATION FOR GOVERNMENT BUDGET ADMINISTRATION (PAGBA, INC)
	UNIFIED ACCOUNTS CODE STRUCTURE (UACS) APPLICATION COURSE -TRAINING PROGRAM	11/4/2014	11/6/2014	24.0	Technical	VISAYAS STATE UNIVERSITY AND DEPARTMENT OF BUDGET AND MANAGEMENT
	36th ANC GACPA: SUSTAINING PUBLIC TRUST THROUGH ACCOUNTABILITY, CREDIBILITY AND TRANSPARENCY"	5/21/2014	5/24/2014	32.0	Technical	GOVERNMENT ASSOCIATION OF CERTIFIED PUBLIC ACCOUNTANTS
	VSUCC BASIC COOPERATIVE COURSE SEMINAR	9/15/2012	9/15/2012	8.0	Technical	VSU CREDIT COOPERATIVE
	67th PICPA ANC TECHNICAL SESSION 6: IFRS 2012 AND BEYOND AND THE CHALLENGES OF COMPLIANCE; TECHNICAL SESSION 7: MANAGEMENT, EXTERNAL AUDITORS AND ACADEME: ROLE ON COMPLIANCE WITH GLOBAL AUDITING STANDARDS; TECHNICAL SESSION 8: PROMOTING STRONG GOVERNANCE THROUGH FINANCIAL ACCOUNTABILITY; TS 9: PARTICIPATORY BUDGETING	11/28/2012	12/1/2012	23.0	Technical	PHILIPPINE INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS
	67th PICPA ANC TECHNICAL SESSION 12: MUSLIM ACCOUNTING; TECHNICAL SESSION 13: TAX FORUM; TECHNICAL SESSION F: PICPA's CONTRIBUTION TO THE GOVERNMENT AND SOCIETY	11/28/2012	12/1/2012	5.0	Technical	PHILIPPINE INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

(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)
	Computer literate: word, excel, ppt				Administrative Personnel Association (AdPA)
	"HIREABLE" CALL CENTER AGENT				Visayas State University Credit Cooperative (VSUCC)
	TESDA PROCTOR				
	NON PROFESSIONAL DRIVER				
	HOBBIES: SINGING, DANCING				
	SPORTS: VOLLEYBALL, BADMINTON				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	April 20, 2017
-----------	---	------	----------------

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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: <u>resignation for professional growth</u>
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: <u>not yet</u>

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

NAME	ADDRESS	TEL. NO.
DR. REMBERTO A. PATINDOL	Apt. 85 Visca, Baybay City, Leyte	053 563 7681
DR. ROBERTO C. GUARTE	Visca, Baybay City, Leyte	0917 310 8078
DR. VICTOR B. ASIO	Visca, Baybay City, Leyte	0917 6341438

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.



MARIA TERESA A. CRUZ

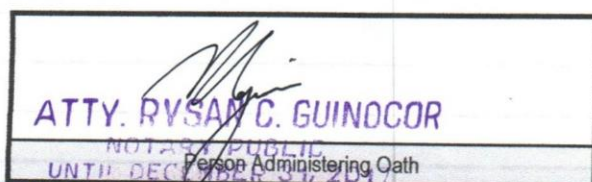
PHOTO

Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance
Government Issued ID: Land Transportation Office
ID/License/Passport No.: N10-86-021012
Date/Place of Issuance: 5/27/2016 / Las Piñas

Signature (Sign inside the box)
April 20, 2017
Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this 20 April 2017, affiant exhibiting his/her validly issued government ID as indicated above.

PTR 039-855-BAYBAY/LEYTE-3/12/17
IBP 1030424-TACLOBAN CITY-12/19/16
MCLE COMP. NO. V-0009580-07/20/15
ROLL OF ATTORNEYS NO. 57467