## **PERSONAL DATA SHEET**

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READ THE ATTACHED GUIDE	TO FILLING OUT THE PERSONAL DATA SHEE	T (PDS) BEFORE ACCOMPL	JSHING THE P	DS FORM.		T	•		
Print legibly. Tick appropriate boxe  I. PERSONAL INFORMATIC	es 🔲 ) and use separate sheet if necessary. Indicate	N/A if not applicable. DO NO	T ABBREVIATE		1. CS 10 No.		(Do not fill up. I	For CSC use only	
2 SURNAME	DOSDOS				A VIII SANTE				
FIRST NAME	REYNALDO NAME EXTENSION (JR., SR) N/A								
MIDDLE NAME	VALLEJERA								
3. DATE OF BIRTH									
(mm/dd/yyyy)	4/12/1976	16. CITIZENSHIP				Dual Citizenship			
4. PLACE OF BIRTH	ORMOC CITY	If holder of dual citizenship,						ation	
5. SEX	☑ Male ☐ Female	please indicate the d	letails.	C)				-	
6 CIVIL STATUS	☐ Single ☐ Married	17. RESIDENTIAL ADDRESS	VSU CAMPUS (1. H. COTTAGE)						
	☐ Widowed ☑ Separated		House/Block/Lot No. Street BAYBAY CITY, LEYTE						
	Other/s:		Subdivision/Village Barangay			an har the state of the state o			
7. HEIGHT (m)	5'3"		Children moth						
8. WEIGHT (kg)	152 KLS	ZIP CODE	City/Municipality			Province 6521-A		***************************************	
9. 8L000 TYPE	В	18. PERMANENT ADDRESS	BARANGAY SABANG BAO						
10. GSIS ID NO.	LP76041201068		Housel-Block/Lat No. Street ORMOC CITY, LEYTE Subdivision/Village Barangay						
11. 000 0 110.	2170041201000					Barangay			
11. PAG-IBIG ID NO.	1700-0028-7718			ity/Municipality			Province		
12. PHILHEALTH NO.	13000065402-8	ZIP CODE					6541-A		
13. SSS NO.	N/A	19. TELEPHONE NO.		NA					
14. TIN NO.	922-433-071	20. MOBILE NO.		09351346393					
15. AGENCY EMPLOYEE NO.	VOO0597	21. E-MAIL ADDRESS (if any)	bhudz rey@yahoo.com						
II. FAMILY BACKGROUNE	)								
22. SPOUSE'S SURNAME	N/A		23. NAME of CH	LDREN (Write	full name and	list all)	DATE OF BIRT	TH (mm/dd/yyyy)	
FIRST NAME	N/A	MAME EXTENSION (JR., SR)	23. NAME of CHILDREN (Write full name and is REYDALYN A. DOSDOS		06				
	THA .						6/ 04/2005		
MIDDLE NAME				AURIAN	O. DOSDOS	•	10/14	V2018	
OCCUPATION									
EMPLOYER/BUSINESS NAME									
BUSINESS ADDRESS									
TELEPHONE NO.  24. FATHER'S SURNAME	DOSDOS		-	-					
FIRST NAME	DOSDOS	NAME EXTENSION (JR., SR)							
	EUTIQUIO								
MIDDLE NAME	PEREZ								
25. MOTHER'S MAIDEN NAME	SUMAYA								
SURNAME	DOSDOS								
FIRST NAME	LILIA								
MIDDLE NAME	VALLEJERA			(0	Continue on se	eparate sheet if neces	ssary)		
III. EDUCATIONAL BACK	GROUND								
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	SCHOLARSHIPY ACADEMIC HONORS	
ELEMENTARY BARANGAY SABANG BAO ELEMENTARY SCHOOL		PRIMARY EDUCATION		From 1985	To 1989	PRIMARY	1990	RECEIVED	
SECONDARY	BARANGAY SAN JOSE NATIONAL HIGHSCHOOL	HIGHSCHOOL EDUCATION		1991	1994	HIGHSCHOOL	1995	NA	
VOCATIONAL / TRADE COURSE	JOSE NAVARRO POLY TECHNIC COLLEGE	ELECTRONICS COMPUTER MENTAINANCE TECHNICIAN		1994	1997	VOCATIONAL	1997	NA NA	
COLLEGE	NA NA	TECHNICIAN							
GRADUATE STUDIES	NA NA								
		Continue on separate sheet if neo	cessary)			1			
SIGNATURE	R70	P		DA	ATE .	De	ecember 15, 2020		

CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE		RATING	I FXARRATION I DIACE OF		OF EXAMINATION / CONFERMENT			LICENSE (if applicable)	
BA	BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	CONFERMENT	FLING OF EXMINAL	ATION / CONFERMENT		NUMBER	Date of Validity
	TESDA	A NCII							
COMP	UTER HARDW	ARE SERVICES NCII		MAY 05 20016	STI - COLLEGE	MAASIN C	ITY)		
	CATEG	ORY 4							
WORK	EXPERIENCE		(Co	ntinue on separate sheet if	necessary)				
		ent. Start from your recent	work) Description	of duties should be in	ndicated in the attached	Work Expe	ience sheet.		
INCLUSIVE DATES (mm/ddd/yyyy) POSITION TI (Write in full/Do not a			DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		MONTHLY SALARY	SALARY/JOB/PAY GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'SERVIC	
2/1997	12/15/1999	COMPUTER MENTAINAL	NCE TECHNICIAN	MINDWORKS CO	4000.00	PENCHEN	JOB ORDER	NA	
72000	12/22/2000	COMPUTER MENTAINAI	NCE TECHNICIAN	ORMOC CITY TELEF	4500.00		JOB ORDER	NA	
2/2001	5/15/2002	COMPUTER MENTAINAI /FACILATA	NCE TECHNICIAN	SYSTEM TECHNO	8500.00		REGULAR	NA	
/2002	PRESENT	COMPUTER TECHNICIA		VISAYAS STA	ATE UNIVERSITY	12200.00		CASUAL	Υ
SICH	ATUDE		Co (Co	ntinue on separate sheet if					
SIGN	ATURE		T		DATE		12/15, 2020		

W. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC	NON-GOVERNMENT/PEOPLE/VOL					
29. NAME & ADDRESS OF O		(mm/	VE DATES ddfyyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK
		From	То			
NA						
			-			
	(Confir	ue on senarale	sheet if necess	and		
VII. LEARNING AND DEVELOPMENT (L&D) INTERVE (Start from the most recent L&D/training program an	ENTIONS/TRAINING PROGRAMS ATTE	NDED			nief/Executive/Ma	nagerial positions)
30. TITLE OF LEARNING AND DEVELOPMENT INT (Write in fu	ERVENTIONS/TRAINING PROGRAMS	INCLUSIV ATTE	E DATES OF NDANCE Oddyyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)
		From To			Technical/etc)	
PC REPAIR UPGRADING AN	DASSEMBLY	3/11/20004	3/12/2004	16 HOURS	TECHNICAL	DOST-COSPO-ITC CEBU CITY
BASIC OPERATION AND FAMILIRAZATION ON LINUX OPEN OFFICE			10/21/2005	24 HOURS	TECHNICAL	VISAYAS STATE UNIVERSITY
Computer Hardware Installati	ion and Repair	10/22-/ 2018	10/26/2018	40 HOURS	TECHNICAL	(ICT) LITERACY COMPETENCY
			- Contraction of the Contraction			DEVELOPMENT BUREAU
Networking Essentials ( N	E 2019-06)	10/14/2019	10/18/2019	40 HOURS	TECHNICAL	(ICT) LITERACY COMPETENCY
						DEVELOPMENT BUREAU
			1			
	Provide	via on constrain	about if necess			
VIII. OTHER INFORMATION	COMM	rue on separate	sheet if necess	ary)		
	NON AC	CADEANC DICTO	NCTIONS / RECO	CONTION		MEMBERSHIP IN
31. SPECIAL SKILLS and HOBBIES	32. NON-AL		e in full)	JONNION		33. ASSOCIATION/ORGANIZATION (Write in full)
SINGING			A			N A
DRIVING						
COMPUTER REPAIR, ASSEMBLE AND						
DISASSEMBLE, SOFTWARE AND						
HARDWARE INSTALLATION						
	(Contin	iue on separate	sheet if necess	ary)		I .
SIGNATURE	Kty			D	ATE	12/15/2020
						CS FORM 212 (Revised 2017), Page 3 of 4

	re you related by consanguinity or affinity to the appointing			
	tief of bureau or office or to the person who has immediate	e supervision over you in the Office,		
	ureau or Department where you will be apppointed,			
	within the third degree?	YES V NO		
b.	within the fourth degree (for Local Government Unit - Ca	YES NO		
			If YES, give details:	
35. a.	Have you ever been found guilty of any administrative of	fense?	YES NO	
			If YES, give details:	
<b>.</b>	New you have primitally should be for a way of			
D.	Have you been criminally charged before any court?		☐ YES ☑ NO If YES, give details:	
			Date Filed:	
			Status of Case/s:	
36. H	ave you ever been convicted of any crime or violation of a	uny law, decree, ordinance or regulation by		
	ny court or tribunal?		☐ YES ☑ NO If YES, give details:	
			ii 1ES, give details.	
37. H	ave you ever been separated from the service in any of the	ne following modes: resignation	☐ YES ☑ NO	
	tirement, dropped from the rolls, dismissal, termination, e		☐ YES ☑ NO If YES, give details:	
(a	bolition) in the public or private sector?			
	Have you ever been a candidate in a national or local ele	ection held within the last year (except	YES NO	
Bi	arangay election)?		If YES, give details:	
b.	Have you resigned from the government service during t	he three (3)-month period before the last	YES NO	
	ection to promote/actively campaign for a national or local		If YES, give details:	
39. H	ave you acquired the status of an immigrant or permanen	t resident of another country?	☐ YES ☑ NO	
			☐ YES ☑ NO If YES, give details (country):	
	ursuant to: (a) Indigenous People's Act (RA 8371); (b) Ma			
	277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)	, please answer the following items:		
a. Ai	re you a member of any indigenous group?		☐ YES ☑ NO	
b. Δι	re you a person with disability?		l	ORTHOPEDIC
19	o you a person with disability :		✓ YES	0837080000-0196
c. A	re you a solo parent?		YES NO	0657060000-0196
			If YES, please specify ID No:	
41. RE	EFERENCES (Person not related by consanguinity or affinity to applicant	(appointee)		
	NAME	ADDRESS	TEL NO.	
	GREGORIO GALINATO	BARANGAY GUADALUPE UTOD	N A	==
	OLEGOIAG GALIATIO	BAYBAY CITY, LEYTE	NA (	
62 1				
42. ] (	declare under oath that I have personally accomplishe	d this Personal Data Sheet which is a	true, correct and	
PI	emplete statement pursuant to the provisions of pertinal hillippines. I authorize the agency head/authorized represe	rent laws, rules and regulations of the	Republic of the	
aç	gree that any misrepresentation made in this docu	ument and its attachments shall cau	se the filing of	1421
ac	ministrative/criminal case/s against me.		REYNY	LDE POSDAS
Gove PLF4	rmment Issued ID (i.e. Passport, GSIS, SSS, PRC, Dinier's License, etc.)  ASE INDICATE ID Number and Date of Issuance	a As w		
	nment Issued ID: V OOO597	RANGE		
ID/Lic	ense/Passport No.: H03-05-000508	box)		
Date/F	Place of Issuance: 4/05/2019 BAYBAY CITY, LEYTE		· un	
		Date Accomplished		Right Thumbmark
	SUBSCRIBED AND SWORN to before me this	7 FFM 2021 , affiant exhibit	ing his/her validly issued government ID a	s indicated above.
	MTV.	Way groon		
	CI CI	Person Administering Oa	th	
		1/		

## **WORK EXPERIENCE SHEET**

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

- 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: May 16, 2002 present
- Position: ADMIN AIDE VI
- Name of Office/Unit: INSTRUMENTATION LABORATORIES FACILITIES MENTAINANCE UNIT
- Immediate Supervisor: Legario B. Ramos
- Name of Agency/Organization and Location: I L F M U Visayas State University Baybay, City
  - List of Accomplishments and Contributions (if any)
    - o Repaired Desktop Computer Units(Installed Hardware and Software)
    - o Repaired Printer, Dot Matrix, Inkjet Type
    - o Repaired Computer Power Supply and Laptop adaptor's
  - Summary of Actual Duties

Repair / Maintenance of VSU computer units/Printers

(Signature over Printed Name of Employee/Applicant)

Date: \_\_\_\_\_12/15/20\_