

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	Macapanas		
FIRST NAME	Reynante		NAME EXTENSION (JR., SR)
MIDDLE NAME	Gamalo		
3. DATE OF BIRTH (mm/dd/yyyy)	20/04/1996	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	Tanauan 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	House/Block/Lot No. Street Subdivision/Village Guadalupe Utod Baybay City Barangay City/Municipality Leyte Province
7. HEIGHT (m)	1.68	ZIP CODE	6521
8. WEIGHT (kg)	58		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	House/Block/Lot No. Street Sto. Niño Subdivision/Village Barangay Tanauan Leyte City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6502
11. PAG-IBIG ID NO.	121230953817		
12. PHILHEALTH NO.	130255081714		
13. SSS NO.	N/A	19. TELEPHONE NO.	N/A
14. TIN NO.	727595438	20. MOBILE NO.	09484007050
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	reynantemacapanas@gmail.com

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	Macapanas			
FIRST NAME	Ricardo	NAME EXTENSION (JR., SR)		
MIDDLE NAME	Lumbre			
25. MOTHER'S MAIDEN NAME				
SURNAME	Gamalo			
FIRST NAME	Buena			
MIDDLE NAME	Baldoza			

(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	Sto. Niño Elementary School	Primary	03/06/2003	10/04/2009	N/A	2009	N/A
SECONDARY	Tanauan National High School	High School	04/06/2009	10/04/2013	N/A	2013	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	Visayas State University	Bachelor of Science in Agriculture Major in Soil Science	07/06/2013	14/06/2019	N/A	2019	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	April 12, 2023
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[illegible]

V. WORK EXPERIENCE

[illegible]

<b>SIGNATURE</b>		<b>DATE</b>	April 12, 2023
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[illegible]


VII. LEARNING AND DEVELOPMENT (L&amp;D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

[illegible]





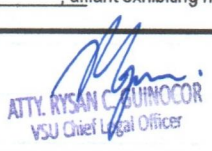
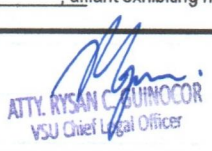
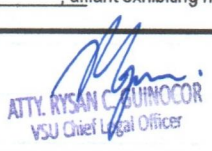
VIII. OTHER INFORMATION

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31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Soil and Plant Tissue Analysis	N/A	N/A
Nutrient Formulation for Hydroponics	N/A	N/A

SIGNATURE		DATE	April 12, 2023
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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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____ Finished contract																
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><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>Romel B. Armecin</td><td>Visca Baybay City Leyte</td><td>09190973688</td></tr><tr><td>Suzette B. Lina</td><td>Visca Baybay City Leyte</td><td>09199613922</td></tr><tr><td>Beatriz C. Jadina</td><td>Pangasugan Baybay City Leyte</td><td>09064442991</td></tr></table>		NAME	ADDRESS	TEL. NO.	Romel B. Armecin	Visca Baybay City Leyte	09190973688	Suzette B. Lina	Visca Baybay City Leyte	09199613922	Beatriz C. Jadina	Pangasugan Baybay City Leyte	09064442991				
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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>Taxpayer's Identification Number</td></tr><tr><td>ID/License/Passport No.:</td><td>727595438</td></tr><tr><td>Date/Place of Issuance:</td><td>8/9/2018 at Bureau of Internal Revenue, Ormoc City</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:	Taxpayer's Identification Number	ID/License/Passport No.:	727595438	Date/Place of Issuance:	8/9/2018 at Bureau of Internal Revenue, Ormoc City	<table><tr><td colspan="2"></td></tr><tr><td colspan="2">Signature (Sign inside the box)</td></tr><tr><td colspan="2">April 12, 2023</td></tr><tr><td colspan="2">Date Accomplished</td></tr></table>			Signature (Sign inside the box)		April 12, 2023		Date Accomplished	
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Right Thumbmark																	
SUBSCRIBED AND SWORN to before me this <u>13 APR 2023</u> , affiant exhibiting his/her validly issued government ID as indicated above.																	
<table><tr><td> ATTY. RYSAN C. QUINOCOR VSU Chief Legal Officer</td></tr><tr><td>Person Administering Oath</td></tr></table>		 ATTY. RYSAN C. QUINOCOR VSU Chief Legal Officer	Person Administering Oath														
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