

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	Caña			
FIRST NAME	Randy	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	Gatchalian			
3. DATE OF BIRTH (mm/dd/yyyy)	04/15/1982	16. CITIZENSHIP	☒ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization Pls. indicate country:	
4. PLACE OF BIRTH	Baybay, Leyte	If holder of dual citizenship, please indicate the details.	Philippines	
5. SEX	☒ Male ☐ Female			
6. CIVIL STATUS	☐ Single ☒ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS		
7. HEIGHT (m)	3.00	ZIP CODE	House/Block/Lot No. Street Guadalupe (Utod) Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province	
8. WEIGHT (kg)	65.00		6521	
9. BLOOD TYPE	A+		18. PERMANENT ADDRESS	
10. GSIS ID NO.	N/A		ZIP CODE	House/Block/Lot No. Street Guadalupe (Utod) Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
11. PAG-IBIG ID NO.	N/A			6521
12. PHILHEALTH NO.	N/A			
13. SSS NO.	N/A	19. TELEPHONE NO.		N/A
14. TIN NO.	N/A	20. MOBILE NO.	963-052-2832	
15. AGENCY EMPLOYEE NO.	VJO01378	21. E-MAIL ADDRESS (if any)	randy.cana@vsu.edu.ph	

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	MORENO		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	HANCEY ISABEL	NAME EXTENSION (JR., SR)	RANCEY JULIA M. CAÑA	07/20/2005
MIDDLE NAME	AMIHAN		JO-ANN LI M. CAÑA	03/30/2007
OCCUPATION			PRINCESS XIANNA M. CAÑA	07/04/2010
EMPLOYER/BUSINESS NAME			FRANCE ISABELA M. CAÑA	09/02/2015
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	CAÑA			
FIRST NAME	LOLITO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	DELA CRUZ			
25. MOTHER'S MAIDEN NAME	BABY EMILIANA DIAZ			
SURNAME	CAÑA			
FIRST NAME	BABY EMILIANA			
MIDDLE NAME	DIAZ		(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	N/A						
SECONDARY	N/A						
VOCATIONAL/ TRADE COURSE	N/A						
COLLEGE	N/A						
GRADUATE STUDIES	N/A						

(Continue on separate sheet if necessary)

SIGNATURE		DATE	01/31/2023
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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			
	N/A	N/A	N/A	N/A	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			
	5S TRAINING-SEMINAR FOR UTILITY AND MESSENGER PERSONNEL	11/24/2022	11/24/2022	8	Managerial	ODAS-PRPEO
	Small Engine	01/01/2015	11/30/2015	85	Technical	TESDA BAYBAY
	Utility Seminar Workshop	08/10/2011	08/10/2011	16	Technical	PRPEO- Sir Tuditud
	Mr. Softy Ice Cream Inc.	04/05/2005	05/02/2005	120	Technical	Mr. Softy Inc. in Marikina Main
(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)		
	Printing Services	N/A		N/A		
	Binding Services					
	Messengerial Services					
	Carpentry					
	Driving					
	Waiter					
(Continue on separate sheet if necessary)						
SIGNATURE				DATE	01/31/2023	

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)?		☐YES☒NO ☐YES☒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?		☐YES☒NO If YES, give details: ☐YES☒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?		☐YES☒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?		☐YES☒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?		☐YES☒NO If YES, give details: ☐YES☒NO If YES, give details:												
39. Have you acquired the status of an immigrant or permanent resident of another country?		☐YES☒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?		☐YES☒NO If YES, please specify: ☐YES☒NO If YES, please specify ID No ☐YES☒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>ULDERICO ALVIOLA</td><td>UIMC- Visayas State University</td><td>09778512000</td></tr><tr><td>EDITHA G. CAGASAN</td><td>MMDC- Visayas State University</td><td></td></tr><tr><td>JED ASAPH D. CORTES</td><td>VPP/MMDC- Visayas State University</td><td></td></tr></tbody></table>			NAME	ADDRESS	TEL. NO.	ULDERICO ALVIOLA	UIMC- Visayas State University	09778512000	EDITHA G. CAGASAN	MMDC- Visayas State University		JED ASAPH D. CORTES	VPP/MMDC- Visayas State University	
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JED ASAPH D. CORTES	VPP/MMDC- Visayas State University													
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.		ID picture taken within the last 6 months 3.5 cm x 4.5 cm (passport size) With full and handwritten name tag and signature over printed name Computer generated or photocopied picture is not acceptable PHOTO Right Thumbmark												
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: N/A ID/License/Passport No.: N/A Date/Place of Issuance: N/A	Signature (Sign inside the box) 01/31/2023 Date Accomplished													
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above. Person Administering Oath														