CS Form No. 212 Revised 2017		PERSO	NAL DAT	A SH	EE'	Γ			
WARNING: Any misrepresentati	on made in the Person	al Data Sheet and the W	ork Experience Sheet shall	cause the filing	g of adminis	strative/crim	inal case/s agains	st the person	concerned.
READ THE ATTACHED GUIDE 1	O FILLING OUT THE F	PERSONAL DATA SHEE	T (PDS) BEFORE ACCOMP	LISHING THE F	PDS FORM.				
	TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.  S ( 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)							For CSC use only)	
I. PERSONAL INFORMATION	V								
2. SURNAME	GARRIDO								
FIRST NAME	AYRON NIKKI								
MIDDLE NAME	MADREDIJO								
3. DATE OF BIRTH (mm/dd/yyyy)	01/3	16. CITIZENSHIP						zation	
4. PLACE OF BIRTH	ILIHAN, MACROHOI	N, SOUTHERN LEYTE	If holder of dual citizer			— ·			
5. SEX	☑ Male	☐ Female	please indicate the de				•		
6 CIVIL STATUS	Single	Married	17. RESIDENTIAL ADDRESS	House	N/A se/Block/Lot N			ESTRELLA	
	☐ Widowed ☐ Other/s:	Separated		Tious	N/A	υ		Street ILIHAN	
					odivision/Village	9	SC	Barangay DUTHERN LEYTE	
7. HEIGHT (m)	1.7	71 m			ty/Municipality			Province	
8. WEIGHT (kg)	72	2 kg	ZIP CODE				6601		
9. BLOOD TYPE	Ту	ре А	18. PERMANENT ADDRESS	Hous	N/A se/Block/Lot N	0.		ESTRELLA Street	
10. GSIS ID NO.	1	I/A		N/A Subdivision/Village		ILIHAN Barangay			
11. PAG-IBIG ID NO.	12126	6772353				JTHERN LEYTE Province			
12. PHILHEALTH NO.	13-251688866-4		ZIP CODE	6601					
13. SSS NO.	N/A		19. TELEPHONE NO.	N/A					
14. TIN NO.	N/A		20. MOBILE NO.	09277754883/09617609156					
15. AGENCY EMPLOYEE NO.	ı	I/A	21. E-MAIL ADDRESS (if any)		<u>a</u>	<u>yron.garr</u>	ido@vsu.edu	<u>ı.ph</u>	
II. FAMILY BACKGROUND				1					
22. SPOUSE'S SURNAME		N/A			of CHILDREN (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy)	
FIRST NAME	N	I/A	NAME EXTENSION (JR., SR)		N/A			N/A	
MIDDLE NAME		N/A				N/A		N	N/A
OCCUPATION		N/A		N/A N			N/A		
EMPLOYER/BUSINESS NAME		N/A		N/A			N/A		
BUSINESS ADDRESS		N/A				N/A		N/A	
TELEPHONE NO.		N/A				N/A		N	N/A
24. FATHER'S SURNAME		GARRIDO				N/A		N/A	
FIRST NAME	ROI	MMEL	NAME EXTENSION (JR., SR)	N/A		N/A			
MIDDLE NAME	TRIPOLI		N/A				N/A		
25. MOTHER'S MAIDEN NAME				N/A				N/A	
SURNAME	MADREDIJO			N/A				N/A	
FIRST NAME	MARIETTA			N/A			N/A		
MIDDLE NAME	ZAPANTA			(Continue on separate sheet if necessary)					
III. EDUCATIONAL BACKGR	ROUND								
26. LEVEL		F SCHOOL e in full)	BASIC EDUCATION/DEGRE (Write in full)	UNITS FARNED		YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED		
ELEMENTARY	ICHON ELEME	NTARY SCHOOL	BASIC EDUCATION CURR	ICULUM	2005	2011		2011	1ST HONORABLE MENTION
SECONDARY	ICHON NATION	AL HIGH SCHOOL	REVISED BASIC EDUCATION C	CURRICULUM	2011	2015		2015	Salutatorian
VOCATIONAL / TRADE COURSE		N/A	N/A	N/A N/A N/A		N/A	N/A		

BACHELOR OF SCIENCE IN AGRICULTURE (SOIL SCIENCE)

MASTER OF SCIENCE IN SOIL SCIENCE

separate sheet if necessary)

VISAYAS STATE UNIVERSITY - MAIN CAMPUS

VISAYAS STATE UNIVERSITY - MAIN CAMPUS

COLLEGE

GRADUATE STUDIES

SIGNATURE

2019

2023

JUNE 22, 2025

**CUM LAUDE** 

N/A

COLLEGE

GRADUATE MASTER

GRADUATE

2015

2020

DATE

2019

2023

IV. CIVIL SE	ERVICE ELIG	BILITY							
	SPECIAL LA	1080 (BOARD/ BAR) UNDER WS/ CES/ CSEE	RATING (If Applicable)	DATE OF EXAMINATION /	PLACE OF EXAMINATION / CONFERMENT			LICENSE (if a	pplicable)  Date of
		EXAMINATION FOR		NOVEMBER 22-24,	, LICEO DEL VERBO DIVINO, TACLOBAN CITY,			NUMBER	Validity
	AGRICUL		84.67%	2022	LEY			0040434	01/30/2023
			(C	ontinue on separate sheet	if necessary)				
	XPERIENCE ate employme		t work) Descriptio	n of duties should be	indicated in the attached	Work Expe	rience sheet.		
28. INCLU	JSIVE DATES m/dd/yyyy)	POSITION T			ENCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOV'T
From	То	(Write in full/Do not			(Write in full/Do not abbreviate) SALARY applicable)& STE (Format "00-0")		applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVICE (Y/ N)
01/16/2025	05/23/2025	PART-TIME INS	TRUCTOR		SOIL SCIENCE, VISAYAS UNIVERSITY	30000.00		cos	Y
08/12/2024	12/23/2024	PART-TIME INS	TRUCTOR	DEPARTMENT OF	SOIL SCIENCE, VISAYAS UNIVERSITY	16000.00		cos	Y
01/29/2024	05/24/2024	PART-TIME INS	TRUCTOR	DEPARTMENT OF	SOIL SCIENCE, VISAYAS UNIVERSITY	20000.00		cos	Y
02/03/2020	07/31/2020	RESEARCH AS	SISTANT	DEPARTMENT OF	SOIL SCIENCE, VISAYAS UNIVERSITY	11172.95		JOB ORDER	Υ
				OIME	OHIVE KOIT I				
			(C	ontinue on separate sheet					L
SIGNA	TURE				DATE			22, 2025	

VI. VOLUNTARY WORK OR INVOLVEMENT I	N CIVIC / NON-GOVERNMENT /	PEOPLE / VC	DLUNTARY O	RGANIZATION	I/S		
29. NAME & ADDRESS OF OR (Write in full)			/E DATES d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK	
		110111	10				
VII. LEARNING AND DEVELOPMENT (L&D) I		tinue on separate s				_	
Start from the most recent L&D/training program and include				/Executive/Manager	rial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTE		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)  From To		NUMBER OF HOURS	Type of LD ( Managerial/	CONDUCTED/ SPONSORED BY (Write in full)	
(Write in full)					Supervisory/ Technical/etc)		
Training Workshop on Statistical Tools and	Methods for Data Analysis	10/09/2024	10/10/2024	16.0	Technical	ACIAR-SLAM/PCAARRD-PEHM VSU Project Team	
I-day Comprehensive Community-based Disaster Ris	k Reduction Management Training	07/28/2018	07/31/2018	32.0	Technical	Department of Science and Technology - Science Education Institute	
Skills Development (Summer	r Practicum)	04/11/2016	05/20/2016	240	Technical	College of Agriculture and Food Science, Visayas State University	
	(Con	tinue on separate	sheet if necessary)				
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON	-ACADEMIC DISTIN (Write	ICTIONS / RECOGI e in full)	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
READING							
SKILLS RELATED TO SOIL SCIENCE							
	(Con	tinue on separate :	sheet if necessary)				
SIGNATURE		•			ATE	JUNE 22, 2024	

Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree?	☐ YES ☑ NO					
b. within the fourth degree (for Local Government Unit - Car	☐ YES ☑ NO If YES, give details:					
35. a. Have you ever been found guilty of any administrative off	☐ YES ☑ NO If YES, give details:					
b. Have you been criminally charged before any court?	☐ YES ☑ NO If YES, give details:     Date Filed: Status of Case/s:					
36. Have you ever been convicted of any crime or violation of a any court or tribunal?	☐ YES ☑ NO If YES, give details:					
37. Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, in the public or private sector?		✓ YES □ NO If YES, give details: □ I resigned to pursue Master's studies.				
38. a. Have you ever been a candidate in a national or local ele Barangay election)?	ction held within the last year (except	☐ YES ☑ NO If YES, give details:				
· · · · · · · · · · · · · · · · · · ·	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?					
39. Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):					
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magand (c) Solo Parents Welfare Act of 2000 (RA 8972), please	<del>-</del>					
a. Are you a member of any indigenous group?	Are you a member of any indigenous group?					
b. Are you a person with disability?	Are you a person with disability?					
c. Are you a solo parent?	☐ YES ☑ NO If YES, please specify ID No:					
41. REFERENCES (Person not related by consanguinity or affinity to applicant	nt /appointee)					
NAME	ADDRESS	TEL. NO.				
VICTOR B. ASIO	Visayas State University, Baybay City, Leyte Visayas State University, Baybay City,		a 66			
DEEJAY M. LUMANAO	Leyte					
42. I declare under oath that I have personally accomplishe complete statement pursuant to the provisions of pertir Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this doct administrative/criminal case/s against me.	nent laws, rules and regulations of the entative to verify/validate the contents state	Republic of the AYRON NIP	KKI M. GARRIDO PHOTO			
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance	- la l	,				
Government Issued ID: PRC	04					
ID/License/Passport No.: 0040434	ox)					
Date/Place of Issuance: March 2023	JUNE 22, 2024 Date Accomplished	Right <sup>-</sup>	Thumbmark			
SUBSCRIBED AND SWORN to before me this	, affiant exhibi	ting his/her validly issued government ID as ind	licated above.			