CS FORM NO. 212 Revised 2017	PERSOI	VAL DATA	A SH	IEE1	<b>r</b>			
	tion made in the Personal Data Sheet and the					criminal case/s ag	gainst the per	son
	TO FILLING OUT THE PERSONAL DATA SHE			HE PDS FOR		A 31-X)		Tor CCC use solv)
Print legibly. Hick appropriate boxes  1. PERSONAL INFORMATIO	· ( ) ☐ use separate sheet if necessary. Indicate N N	N/A IT not applicable. DO NOT A	ABBREVIA I E.		1. CS ID No.		(Do not illi up. F	For CSC use only)
2. SURNAME	VERANDA							
FIRST NAME	VUN VIC							
MIDDLE NAME								
DATE OF BIRTH (mm/dd/yyyy)	BALBAPLIND  16. CITIZENSHIP  □ by birth □ by naturalize					in the second		
4. PLACE OF BIRTH	BITANIHUAN BAYBAY CITY			☐ by birth ☐ by naturalization  Pls. indicate country:				ization
5. SEX	Male Female	please indicate the de	etails.					
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRESS	COTTHORS House/Block/Lot No. VSu LOWEN CAMPUS Subdivision/Village			Street PANGASUGAN Barangay		
7. HEIGHT (m)	1.8D		13A-73 A-4 City/Municipality		LEYTE Province			
8. WEIGHT (kg)	78	ZIP CODE	6521					
9. BLOOD TYPE	4.4 Ox 1 CT	18. PERMANENT ADDRESS	House/Block/Lot No.		PANOAN Street			
10. GSIŚ ID NO.	N/A NA	and make	WILLIAM COLL		1000	Barangay		W
11. PAG-IBIG ID NO.	1211-7619-0515	d in balling	Subdivision/Village  LA-/RA-/ City/Municipality		LEYLE Province			
12. PHILHEALTH NO.	13-20122-9736-3	ZIP CODE	6	521	y Vest	ADS DOLL	735-P1-3	1600 0
13. SSS NO.	0111- 8329695-0	19. TELEPHONE NO.	N/A					
14. TIN NO.	449-451-069 20.1		09559103265					
15. AGENCY EMPLOYEE NO.	21. E-MAIL ADDRESS (if any) Juana vermoda @ US4. edu. ph							
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME	N/A		23. NAME of Ch	HLDREN (Writ	e full name and	d list all)	DATE OF BIRT	TH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)	MIA	M. U	ENANDA	7	10-12.	2011
MIDDLE NAME								
OCCUPATION								<del></del>
EMPLOYER/BUSINESS NAME								
BUSINESS ADDRESS								
TELEPHONE NO.								-
24. FATHER'S SURNAME								
FIRST NAME	JOSEPH NAME EXTENSION							
MIDDLE NAME  25. MOTHER'S MAIDEN NAME	I PAZ							
SURNAME	BARBARIMO							
FIRST NAME	BLANCA							
MIDDLE NAME	PRYNANOUS		and the second of	(Co	ontinue on sej	parate sheet If neces	sary)	
III. EDUCATIONAL BACKG								
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	E/COURSE	PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	BITANHUAN ELEMENTARY SCHOOL	CALABUATED		2000	2006	GRADUATED	2006	A/A
SECONDARY	BITANIMAN NATIONAL HIGH SCHOOL	GRADUATED		2004	2010	GRADUATED	2010	N/A
VOCATIONAL / TRADE COURSE	CAMENTRY	NCI		2-2017	8-2017	GP40UATEN)	8-2017	NA
COLLEGE	SAINT MICHAEL COLLEGE	aced encush	INAJOR	2018	2020	J3 WITS	N/A	N/A
GRADUATE STUDIES		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1, 100,000				Construction of the	Million and American
SIGNATURE	1-11- h. 1/-	ontinue on separate sheet if nece	essary)	DA	ITE	QT-1	3-202	2
	(1 )				STREET STREET	CS	FORM 212 (Revise	d 2017), Page 1 of 4

27. CARE	ER SERVICE/ RA	1080 (BOARD/ BAR) UNDER		DATE OF				LICENSE (if a	applicable)
SPECIAL LAWS/ CES/ CSEE  BARANGAY ELIGIBILITY / DRIVER'S LICENSE  RATING  (If Applicable)		EXAMINATION / CONFERMENT	ATION / CONFER	RMENT	NUMBER Date of				
LICEN	ICE TO	EXERCISE	4/A	12-12-2019	140/ °R	MDC.	April	W181V0-	Validity
UECC	LIRITY	PROFE SSION	7.		740/		717	0292020	16 120
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						41	LAV		0 7 5
					rument in the second se		II Dece		
			1			11		1 11	
	4E 18 17 1 T	n o e entre				·			
V. WORK E	EXPERIENCE		(Con	ntinue on separate sheet i	f necessary)				
		nt. Start from your recent	t work) Description	of duties should be	indicated in the attached	Work Expe	rience sheet.		
	USIVE DATES Im/dd/yyyy)	POSITION TI		DEPARTMENT / AGE	ENCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOVT
From	То	(Write in full/Do not			/Do not abbreviate)	SALARY	applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVICE (Y/N)
4-16-2019	PRESENT	SECURITY	CHARD	OUDRILM.	/ VSU	583/DAY	N/A	٧.٥	NO
	4-31-2017		IAAD RELIVER		DAMOC CITY	400/DAY	N/A	V.0	No
7-1-2015						200/00			
			OVER		of Engineering		/ /	1.0	NO
10 - Z- 1012	3-14-100	STOCKHAN /SI	ALESMAN	RIZJ -MAI	AJIN BOANCH	285/DAY	NA	COMMPT CTUME	NO
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	7/27/8	STALLS IN STAN	) *km( )	114 (14.2) (4.7)	Was see	The state of the s	A Property		
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			(Cont	inue on separate sheet if r	nenagegry)	www.pelyscont		West of the Control o	
Alexander (Constitution)	TURE	1-1/ac B.	1		DATE	Friday Santa Company	13-2022	20 - 500	STATISTICS STATES

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/PEOPLE/V	OLUNTARY C	RGANIZATIO	N/s	
29. NAME & ADDRESS OF O (Write in full		(mm/c	VE DATES dd/yyyy)	NUMBER OF HOURS		POSITION / NATURE OF WORK
KABALIKAT CIV	ICOM	2018	To 2022	N/A		wenger.
	MYBAY GHAPTEN	2019	2022	NA	Costuc	
VII. LEARNING AND DEVELOPMENT (L&D) Start from the most recent L&D/training program and includ	INTERVENTIONS/TRAINING P		TENDED		rial positions)	noin - 1760 - 1981 - 0/8 ° 8
30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full		ATTEN	E DATES OF IDANCE Id/yyyy)	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
STANDARLD FIRST AND THAIN	ING -LAY RESCUER		111111111111111111111111111111111111111	24 Has.	TECHNICAL	Dolt Irsu
BASIC LIFE SUPPORT AZOUD	ons course-Lay reson	3-7-22	3-9-200	16 Hrs.	TERMICAL	DOH / VSU
IN-SERVICE BUHANCEMENT		12-5-2019	12-12-2019	40 Has.	TECHNICAL	JVO DYNAMIC SECONTY JUANNING ACADEMY
recurity sensices rethan	The late of the la	12-5-2019	12-12-2019	40 Hrs.	TECHNICAL	100 DYNAMIC SECURITY TRAINING ACADOMY
ACTUAL MANKMANSH	110	12-5-209	12-12-2019	3 HM	Toutwich	JVO DYNAMIC SECURITY WASHING KEADERMY
		mea fill.		ALL THE TEN		3. 103
	We wish results will fill					
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chuloig a signuciari - s alden, agu Ma	Face Combo Alling	MAN, MA	14 1999 h	gil	Section 16	el
	Englesome at the	Tally Services			13L / / /	2. 5. 4 45 500 103 103.
	a grand party	ARES STORE		Total Con	iba i iba	of variety of each of the state
				Employee pro-		
VIII. OTHER INFORMATION	(LD)	nfinue on separate	sneet ii necessary)			
31. SPECIAL SKILLS and HOBBIES	32. NO	N-ACADEMIC DISTII (Writ	NCTIONS / RECOG e in full)	NITION	right.	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
TESDA CARPENTAL NOT						MID NATION BAYBAY CHAR
DAIVING MOTOR CYCLE						KABALIKAT CIVILEON
COMPUTER - KING	Arter and regular war and a north					STILLINGS CAN'T VERBURE
EXCELLENT BASKETBALL PLAYO				-		
			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
		ntinue on separate	-	513 362 July 3010 2010		
SIGNATURE	1-Va 1	· Yula		D.	ATE	05-13 - 2022

34.	Are you related by consanguinity or affinity to the appointing of 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 - Care		NO				
	Displayers of	ए। करंग्ड १०६	If YES, give details:	KHE HUKAT TAVI			
35.	a. Have you ever been found guilty of any administrative offe	YES If YES, give details:	NO MOTION, SINA				
	b. Have you been criminally charged before any court?	☐ YES					
36.	Have you ever been convicted of any crime or violation of any any court or tribunal?	☐ YES ☑ NO If YES, give details:					
37.	Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, end (abolition) in the public or private sector?	YES If YES, give details:	□ NO CONTRACT				
38.	a. Have you ever been a candidate in a national or local election)?	tion held within the last year (except	YES If YES, give details	NO MY THE CHARACT			
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local of	YES  If YES, give details	NO THE ABOVE SHEET OF THE				
39.	Have you acquired the status of an immigrant or permanent	☐ YES If YES, give details					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),						
a.	Are you a member of any indigenous group?	and the first of the second	YES NO				
			If YES, please specify:				
b.	Are you a person with disability?		☐ YES ☑ NO If YES, please specify ID No:				
C.	Are you a solo parent?	and the second second	☐ YES ☐ NO If YES, please specify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant Is	appointee)					
	NAME	ADDRESS	TEL, NO.				
S	GIII VIRGILIO A. ESCASINAS	VISAYAS STATE LININGSITY	159161575482				
5	GI VERFINY S. CAINTIC	VISHYAS STATE UNIVERSITY	०१२०१९५५१८				
	ENGR. 19160 L. LEBRNA	VISAYAS STATE UNINOWINY					
42.	I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertine Philippines. I authorize the agency head/authorized represe agree that any misrepresentation made in this document administrative/criminal case/s against me.	ent laws, rules and regulations of the I ntative to verify/validate the contents state	Republic of the did not be did no				
P	Sovernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)  PLEASE INDICATE ID Number and Date of Issuance  Sovernment Issued ID:	J-V-0 B.V	/				
IC	0/License/Passport No.: 449 - 451 - 569	)x)					
D	rate/Place of Issuance: 3-2/-2014	este com time (an est production analysis according	Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this	, affiant exhibitin		overnment ID as indicated above.			
				१६०१८ मार चिक्राप्टर हो। जुलार १५०००			
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-			a	CS FORM 212 (Revised 2017), Page 4 of 4			

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