CS Form No. 212 Revised 2017								
	PERSOI	NAL DAT	A SH	EE7				
WARNING: Any misrepresentati	ion made in the Personal Data Sheet and the	Work Experience Sheet sh	all cause the f	iling of adn	ninistrative/d	criminal case/s a	gainst the pe	rson
concerned.	TO FILLING OUT THE PERSONAL DATA SHE	•		·			,	
Print legibly. Tick appropriate boxes () and use separate sheet if necessary. Indicate N/A				1. CS ID No.		(Do not fill up.	For CSC use only)
I. PERSONAL INFORMATION								
2. SURNAME	ESPINOSA							
FIRST NAME	JOY NAME EXTENSION (JR., SR)							
MIDDLE NAME	SOLANO							
3. DATE OF BIRTH (mm/dd/yyyy)	10/27/1991	16. CITIZENSHIP		☑ Filipir	по 🗆	Dual Citizenship by birth	by naturali	zation
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citizens				Pls. indicate of		
5. SEX	Male Female ☑	please indicate the de	tails.					•
6 CIVIL STATUS	Single Married ☑ □ Widowed Separated	17. RESIDENTIAL ADDRESS	Hou	se/Block/Lot No).		Street	
	Other/s:						BUNGA	
7. HEIGHT (m)	0.129		Su	bdivision/Vill BAYBAY	age		Barangay LEYTE	
			C	ity/iviunicipai	ity		Province	
8. WEIGHT (kg)	55	ZIP CODE 18. PERMANENT ADDRESS				6521-A		
9. BLOOD TYPE	AB+	10. FERWANENT ADDRESS	Hou	se/Block/Lot No).		Street BUNGA	
10. GSIS ID NO.	NA		Su	bdivision/Vili	age		Barangay	
11. PAG-IBIG ID NO.	121080492433		BAYBAY City/Municipality				LEYTE Province	
12. PHILHEALTH NO.	130501452964	ZIP CODE	6521-A					
13. SSS NO.	0631894229	19. TELEPHONE NO.	NA					
14. TIN NO.	476480605	476480605 20. MOBILE NO. +6392811823						
15. AGENCY EMPLOYEE NO.	NA	21. E-MAIL ADDRESS (if any)		į	oy.espino	sa@vsu.edu.	<u>oh</u>	
II. FAMILY BACKGROUND								
22. SPOUSE'S SURNAME			23. NAME of CHI	LDREN (Write	full name and li	st all)	DATE OF BIRTH (mm/dd/yyyy)	
FIRST NAME		NAME EXTENSION (JR., SR)						
MIDDLE NAME								
OCCUPATION								
EMPLOYER/BUSINESS NAME								
BUSINESS ADDRESS								
TELEPHONE NO.								
24. FATHER'S SURNAME	ESPINOSA						10/04/1961	
FIRST NAME	TIRSO	NAME EXTENSION (JR., SR)						
MIDDLE NAME	ORNOPIA							
25. MOTHER'S MAIDEN NAME								
SURNAME	SOLANO						11/2	29/1961
FIRST NAME	CAROLINA							
MIDDLE NAME	SALUBRE			(C	ontinue on se _l	parate sheet if neces	sary)	
III. EDUCATIONAL BACKGRO	OUND							
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRE (Write in full)	EE/COURSE	PERIOD OF A	ATTENDANCE To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	BUNGA ELEMENTARY SCHOOL	ELEMENTARY EDUCA	TION	06/01/1998	3/30/2004	NA	2004	WITH HONORS
SECONDARY	BUNGA NATIONAL HIGH SCHOOL	SECONDARY EDUCAT	TION	06/01/2005	3/30/2008	NA	2008	WITH HONORS

SURNAME	SOLANO							11/29/1961	
FIRST NAME	CAROLINA								
MIDDLE NAME	SALUBRE			(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	
				From	То	(Il flot graduated)		RECEIVED	
ELEMENTARY	BUNGA ELEMENTARY SCHOOL	ELEMENTARY EDUCATION		06/01/1998	3/30/2004	NA	2004	WITH HONORS	
SECONDARY	BUNGA NATIONAL HIGH SCHOOL	SECONDARY EDUCATION		06/01/2005	3/30/2008	NA	2008	WITH HONORS	
VOCATIONAL / TRADE COURSE	NA	NA		NA	NA	NA	NA	NA	
COLLEGE	VISAYAS STATE UNIVERSITY	COLLEGE		08/01/2016	6/22/2020	NA	2020	NA	
GRADUATE STUDIES	NA	NA		NA	NA	NA	NA	NA	
(Continue on separate sheet if necessary)									
SIGNATURE	\$			Di	ATE		01/28/2022		

IV. CIVIL SERVICE ELIGIBILITY									
27. CARE	CDECIAL LAWCY CECY CODE RATING EVAMINATION / DIACE OF EVAMINATION / CONFERMENT		MENT	LICENSE (if applicable)					
ВА		ITY / DRIVER'S LICENSE	(If Applicable)	CONFERMENT	PLACE OF EXAMINATION / CONFERMENT		NUMBER	Date of Validity	
	N.	A	NA	NA	NA			NA	NA
			(6)						
V. WORK E	EXPERIENCE rate employme	nt. Start from your recent		ontinue on separate shee		d Work Expe	erience sheet.		
	USIVE DATES					a work Expe	SALARY/ JOB/ PAY		GOV'T
(n From	nm/dd/yyyy)	POSITION (Write in full/Do not			ENCY / OFFICE / COMPANY ull/Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/ INCRE ME NT	STATUS OF APPOINTMENT	SERVICE (Y/N)
08/01/2020	PRESENT	PART-TIME INS	TRUCTOR	VISAYAS S	TATE UNIVERSITY	17,000.00- 20,000.00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Y
						20,000.00			
				ontinue on separate snee	I II necessarvi				
SIGN	IATURE		<u> </u>	manue on Separate SA66	DATE		01/28/2022		

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF OI (Write in full)			VE DATES (dd/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
NA		NA	NA	NA	NA		
VII. LEARNING AND DEVELOPMENT (L&D)		ontinue on separate					
(Start from the most recent L&D/training program and include				xecutive/Managerial	positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			E DATES OF NDANCE dd/yyyy) To	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
LARAVEL 7 & VUE	JS	From 8/26/2020	8/28/2020	24.0		DEPARTMENT OF COMPUTER SCIENCE AND TECHNOLOGY	
VSU E-LEARNING ENVIRONMENT TRAINING-WORKSH	OP SERIES	12/04/2020	12/14/2020	24.0		DEPARTMENT OF COMPUTER SCIENCE AND TECHNOLOGY	
GETTING GROUNDED ON ANALYTICS		07/23/2021	09/27/2021	15.0		DEVELOPMENT ACADEMY OF THE PHILIPPINES	
IT PASSPORT CERTIFICATION EXAMINATION		10/27/2020	10/27/2020	4.0		PHILIPPINE NATIONAL IT STANDARDS FOUNDATION	
BEST PRACTICES IN WRITING AND PUBLISHING YOUR	RESEARCH PAPER	04/16/2021	04/16/2021	2.0		ELSEVIER	
SEMINAR/ LECTURE ON INTELLECTUAL PROPERTY RIG COMMERCIALIZATION OF TECHNOLOGIES	GHTS AWARENESS AND	10/26/2021	10/26/2021	4.0		TECHNOLOGY BUSINESS INCUBATOR VSU	
CHOOSING THE RIGHT JOURNAL FOR YOUR RESEARCH	H ARTICLES	10/05/2021	10/05/2021	2.0		ELSEVIER	
SEAMO-NEW ZEALAND MASTER CLASS ON EDUCATION SECURITY	N TECHNOLOGY AND DIGITAL	09/30/2021	09/30/2021	2.0		SEAMO	
SECORITI							
	(Cc	ontinue on separate	sheet if necessary)				
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON	N-ACADEMIC DISTII (Wri	NCTIONS / RECOGI te in full)	NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
IMAGE PROCESSING	NA					NA NA	
WEB APPLICATION DEVELOPMENT			1			NA	
		antinua	chast if				
SIGNATURE		ontinue on separate	aneet ii necessary)	D	ATE	1/28/2022	

 34. Are you related by consanguinity or affinity to the appointing o chief of bureau or office or to the person who has immediate sup Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Caree 	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:					
35. a. Have you ever been found guilty of any administrative offens	e?	☐ YES ☑ NO If YES, give details:				
b. Have you been criminally charged before any court?	YES V No lf YES, give details: Date Filed: Status of Case/s:	0				
36. Have you ever been convicted of any crime or violation of any la any court or tribunal?	36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?					
37. Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, find 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 Barangay election)?	n 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 res	☐ YES ☑ NO If YES, give details (country):					
 40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna C and (c) Solo Parents Welfare Act of 2000 (RA 8972), please an a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 	If YES, please specify: ☐ YES If YES, please specify ID No:	NO				
41. REFERENCES (Person not related by consanguinity or affinity to applicant /s						
NAME	ADDRESS	TEL. NO.				
ROLDAN PIEDRAVERDE	BRGY. BUNGA, BAYBAY CITY, LEYTE					
JIMMY ESPINA	PCC, NUEVA ECIJA	63945559102				
IVY VILLAR	BRGY. BUNGA, BAYBAY CITY, LEYTE	6.39356E+11				
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 herei n. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.						
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance						
Government Issued ID: TIN	Φ	- 11				
ID/License/Passport No.: 476-480-605	x)					
Date/Place of Issuance: 10/15/2015		Right Thumbmark				
SUBSCRIBED AND SWORN to before me this	, affiant exhibiting	g his/her validly issued governme	ent ID as indicated above.			
	Person Administering Oath					