CS Form No. 212 Revised 2017	PERSO	NAL DAT	A SHEET	г		
WARNING: Any misrepreser	ntation made in the Personal Data Sheet and the	Work Experience Sheet shall	cause the filing of adminis	trative/criminal case/s age	ainst the person concerned.	
	DE TO FILLING OUT THE PERSONAL DATA SHE			. CS ID No.	(Do not fill up. For CSC use only	
I. PERSONAL INFOR		ilicate N/A il Not applicable. Do N	OT ABBREVIATE.	, CS ID No.	(Do not fill up. For CSC use only	
2. SURNAME	DONAYRE					
FIRST NAME	JERLYN			NAME EXTENS	ION (JR., SR) N/A	
MIDDLE NAME	MAARAT	300 Julius				
3. DATE OF BIRTH (mm/dd/yyyy)	06/26/1992	16. CITIZENSHIP	☑ Filipino ☐ Dual Citize			
4. PLACE OF BIRTH	BAYBAY, LEYTE	If holder of dual citizer	nship,	□ by birth Pls. indi	by birth by naturalization Pls. indicate country:	
5. SEX	☐ Male ☑ Female	please indicate the de	etails. Please indica		_	
6 CIVIL STATUS	✓ Single	17. RESIDENTIAL ADDRES			Zone 1	
o omeomico	☐ Widowed ☐ Separated		House/Block/Lot N	Vo.	Street	
	Other/s:		Subdivision/Villag		Barangay	
7. HEIGHT (m)	1.52		BAYBAY CIT City/Municipality		LEYTE Province	
8. WEIGHT (kg)	75	ZIP CODE	6521			
9. BLOOD TYPE	0	18. PERMANENT ADDRESS	House/Block/Lot No.		Zone 1 Street	
10. GSIS ID NO.	N/A		House/Block/Lot I	vo.	Street	
11. PAG-IBIG ID NO.	1212-5153-13-06		Subdivision/Village BAYBAY CITY		Barangay LEYTE	
TT. PAG-IBIG ID NO.			City/Municipality		Province	
12. PHILHEALTH NO.	13-201231367-9	ZIP CODE	6521			
13. SSS NO.	06-4301074-5	19. TELEPHONE NO.	N/A			
14. TIN NO.	758-315-417	20. MOBILE NO.	0926-308-1160			
15. AGENCY EMPLOYEE NO). N/A	21. E-MAIL ADDRESS (if any	jerlyndonayre@gmail.com		l.com	
II. FAMILY BACKGR	OUND					
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	JENICA ROSE D. JABON		09/01/2012	
MIDDLE NAME	N/A	1/10 (0)	FRANCHEZKA YLAINE D. JABO		01/15/2015	
OCCUPATION	N/A		JERICHO MATT D. JABON		05/01/2018	
EMPLOYER/BUSINESS N	NAM N/A	·				
BUSINESS ADDRESS	N/A					
TELEPHONE NO.	N/A					
24. FATHER'S SURNAME	DONAYRE	·			1	
FIRST NAME	CEDRIC	NAME EXTENSION (JR., SR)				
MIDDLE NAME	ILAIDA				1	
25. MOTHER'S MAIDEN NAM	IE - Mary Mary Mary Mary Mary Mary Mary Mary					
SURNAME	MAARAT					

FIRST NAME LYDIA MIDDLE NAME CONEJOS (Continue on separate sheet if necessary) SCHOLARSHIP ACADEMIC HONORS RECEIVED HIGHEST LEVEL/ UNITS EARNED (if not graduated) 26. NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE PERIOD OF ATTENDANCE YEAR GRADUATED LEVEL (Write in full) (Write in full) From То **BAYBAY NORTH 1 CENTRAL** NON-SCHOLASTIC AWARD GRADUATE ELEMENTARY **Primary Education** 2000 2005 2008 SCHOOL D GRADUATE **BAYBAY NATIONAL HIGH** SECONDARY Secondary Education 2005 2009 2012 N/A SCHOOL D VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A TRADE COURSE Bachelor of Science in COLLEGE **VISAYAS STATE UNIVERSITY** 2016 2023 124 Units N/A N/A Computer Science GRADUATE N/A N/A N/A N/A N/A N/A N/A STUDIES tinue on separate sheet if necessary) 2024 MAY 17 SIGNATURE DATE

	ER SERVICE/ F	RA 1080 (BOARD/ BAR)	DATE	DATE OF				LICENSE (if a	pplicable)
UN	UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE RATING (If Applicable) RATING EXAMINATION / CONFERMENT PLACE OF EXAMINATION / CONFERMENT			ERMENT	NUMBER	Date of Validity			
CAREER S	SERVICE SU	JB-PROFESSIONAL		03/03/2024	TACLOB	AN CITY			
H1000000000000000000000000000000000000					1.				
			(Conti	nue on separate sheet	if necessary)				
DESCRIPTION OF THE PARTY OF THE	EXPERIEN	NCE nent. Start from your re	ecent work) Desc	ription of duties sh	ould be indicated in the	e attached l	Work Experie	ence sheet	
28. INCLUS	SIVE DATES				AGENCY / OFFICE /		SALARY/ JOB/ PAY GRADE (if		GOV'T
	n/dd/yyyy)	POSITION 1 (Write in full/Do not		CO	MPANY Do not abbreviate)	MONTHLY SALARY	applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	SERVICE (Y/N)
From	То		A.1. III	D: 1 14		603.40/da	INCREMENT	10	· ·
09/06/2023		Administrativ			gement Office	у	00-00	J0	Y
09/11/2023		Virtual Ass			ce Communication	200/hour	00-00	Freelance	N
05/12/2022	5/31/2023	Virtual Ass	istant	Taylor	ed Legacy	100/hour 553,40/da	00-00	Freelance	N
01/04/2021	8/31/2022	Administrativ	e Aide III		Head for Planning	у	00-00	JO	Y
10/01/2020	12/31/2020	Administrative Aid	e I/Messenger	Planning, Resou	/ice President for irge Generation and	553.40/da y	00-00	JO	Υ
08/01/2020	9/30/2020	Administrativ	ve Aide I		/ice President for irge Generation and	553.40/da y	00-00	JO	Υ
6/22/2019	08/03/2020	Cashie	er	Metro Retail Stores Group Incorporation		350/day	00-00	Regular	N
				IIICOI	Distation				
									
					-				
		_							
		^	Cont	ue on separate sheet l	If recessord				
SIGNA	TURE	Jo.	Conan	us on apparate sneet	DATE	MAY	1 7 20	24	4
						CIAI		212 (Revised 2017	7), Page 2 of
		*							

VI. VOLUNTARY WORK OR INVOLV	EMENT IN CIVIC / NON-GO	VERNMEN	T / PEOPLE	/ VOLUNI	TARY ORGA	NIZATION/S	
29. NAME & ADDRESS OF ORGANIZATION		INCLUSIVE DATES NUMBER OF			DOSTROM AND THE OF MODIC		
(Write in fo	ull)	From	То	HOURS		POSITION / NATURE OF WORK	
					-		
	Contin	ue on senarate	sheet if nocessa	erv)			
VII. LEARNING AND DEVELOPMEN					ED		
30. TITLE OF LEARNING AND DEVELOPME PROGRAMS	30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING		DATES OF IDANCE Id/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
Application of Virtual Reality to Ag	priculture I and I se and	From	То		rechnicayetc)		
Transportation	Plans	06/22/2022	06/22/2022	8.0	Technical	Visayas State University	
Disaster Risk Reduction and Managem City	ent Training for LGU-Baybay	04/06/2022	04/06/2022	8.0	Technical	Visayas State University	
98th VSU Anniversary webinar	"My Changing Body"	02/05/2022	02/05/2022	4.0	Technical	Visayas State University	
Virtual Data Privacy Act 2012	Awareness Seminar	07/04/2022	07/04/2022	8.0	Technical	Visayas State University	
Webinar on Menopause and Other Con	nmon Gynecologic Problems	3/31/2022	3/31/2022	4.0	Technical	Visayas State University	
Eastern Visayas Project Me	onitoring System	02/03/2022	02/03/2022	8.0	Technical	National Economic and Developmen	
Re-Orientation of Employees' Dustie		9/31/2021	9/31/2021	8.0	Technical	Autnority Visayas State University	
Good Customer				120,00			
97th VSU Funding Anniversary "The B Rebuilding the Economy from the COV		01/04/2021	01/04/2021	20.0	Technical	Visayas State University VSU-College of Management and	
SUCs and H	Els	05/03/2021	05/03/2021	2.5	Technical	Economics	
Control your Records before They C Records Managemnt and		1/27/2021	1/27/2021	3.0	Technical	DOST-STII	
ISO 9001:2015 Awareness/Re-	-awareness Webinar	11/27/2020	11/27/2020	8.0	Technical	Visayas State University	
Document Tracking	g System	11/13/2020	11/13/2020	3.0	Technical	VSU- Human Resource Information System	
Information Security and D	Ocument Control	06/11/2020	06/11/2020	1.0	Technical	AGF	
Operational Planning Workshop and	Reframing of the Strategic	05/10/2020	07/10/2020	24.0	Technical	Visayas State University	
Workshop on The Assessment of Ac		9/30/2020	9/30/2020	8.0	Technical	Visayas State University	
Settings of the Strate Organizing your VSU Email for St					-	-	
		11/20/2020		1.5	Technical	VSU-Web Team	
Positive Provoce	ations	12/11/2016	12/11/2:016	8.0	Technical	Visayas State University	
Software Develo	pment	01/04/2009	09/06/2:010	300.0	Technical	TESDA	
Information and Communic	ation Technology	01/08/2008	09/05/2:009	300.0	Technical	TESDA	
	(Continu	ue on separate :	sheet if necessa	ry)	15.EX		
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				MEMBERSHIP IN 33. ASSOCIATION/ORGANIZATION (Write in full)		
Language: Can speak English	2nd Runner-up in Singles Badminton Tournament				BASIC ECCLESIAL COMMUNITIES		
Computers Literacy: MS word, MS Excel and MS PowerPoint Communication: Comfortable in writing and speaking Obtained 99% of National College Assessment Examination							
	(Continu	ue on separate :	sheet if necessa	ry)			

34.	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					
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 by 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, er 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 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 election to promote/actively campaign for a national or local	☐ YES ☑ NO If YES, give details:						
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):						
40. a. b.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?	☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO						
41	REFERENCES (Person not related by consanguinity or affinity to applicant /	annointee)	If YES, please specify	/ ID No:				
	NAME	ADDRESS	TEL. NO.					
_ 0	Toni Marc L. Dargantes	Gaas Baybay City, Leyte	0917-634-1474					
-	Dilberto O. Ferraren	Visayas State University	0917-634-1488	60				
	Daniel Leslie S. Tan	Visayas State University	0932-868-5396	194				
42.	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.							
P	overnment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance overnment Issued ID: Voter's ID							
ID	/License/Passport No.: 3708-0062B-F2692JMD20000	ox)						
Date/Place of Issuance: Comission of Election 5/17/2024 Date Accomplished				Right Thumbmark				
VI-	SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.							
		h						
_				CS FORM 212 (Revised 2017), Page 4 of 4				