PERSONAL DATA SHEET

against the person concerne READ THE ATTACHED GUID	E TO FILLING OUT THE PERSONAL DAT	TA SHEET (PDS) BEFORE	ACCOMPL	ISHING TH	E PDS FO	RM.			
Print legibly. Tick appropriate boxes I. PERSONAL INFORMATI) and use separate sheet if necessary. Indicate	N/A if not applicable. DO NO	T ABBREVIAT	E.	1. CS ID No	(D	o not fill up. For	CSC use only	
2. SURNAME	BALURAN								
FIRST NAME	JOHN RICK NAME EXTENSION (JR., SR)								
MIDDLE NAME	GIDA								
3. DATE OF BIRTH (mm/dd/yyyy)	12/7/1997		✓ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization						
4. PLACE OF BIRTH	CABULIHAN, MAASIN CITY	If holder of dual citize	_ , ,						
5. SEX	✓ Male ☐ Female	please indicate the d						•	
6 CIVIL STATUS	Single Married	17. RESIDENTIAL ADDRESS	PUROK 3						
	✓ Widowed Separated Other/s:		House/Block/Lot No. Street CABULIHAN						
7. HEIGHT (m)	167		Subdivision/Village MAASIN CITY		е	Barangay SOUTJERN LEYTE			
		ZIP CODE	City/Municipality		6600	Province			
8. WEIGHT (kg)	55	18. PERMANENT ADDRESS	6600 S PUROK 3						
9. BLOOD TYPE	N/A	-		se/Block/Lot N	lo.		Street		
10. GSIS ID NO.	N/A			division/Villag			CABULIHAN Barangay		
11. PAG-IBIG ID NO.	N/A		MAASIN CITY City/Municipality		SOUTHERN LEYTE Province		TE		
12. PHILHEALTH NO.	N/A	ZIP CODE		6600					
13. SSS NO.	N/A	19. TELEPHONE NO.		N/A					
14. TIN NO.	N/A	N/A 20. MOBILE NO.			09391017864				
15. AGENCY EMPLOYEE NO.	AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) johnrickbaluran18@gma				l.com				
II. FAMILY BACKGROUNI							DATE O	AE DIDTH	
22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name		e and list all) DATE OF BIRTH (mm/dd/yyyy)				
FIRST NAME	N/A	NAME EXTENSION (JR., SR)		N/A			N/A		
MIDDLE NAME	N/A								
OCCUPATION	N/A								
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER'S SURNAME	BALURAN	T							
FIRST NAME	ENRIQUE	NAME EXTENSION (JR., SR)							
MIDDLE NAME	ESPANTO								
25. MOTHER'S MAIDEN NAME									
SURNAME	GIDA								
FIRST NAME	TERESA								
MIDDLE NAME MACALDO (Continue on separate						parate sheet if nec	essary)		
III. EDUCATIONAL BACK	GROUND							SCHOLARSH	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGRI (Write in full)			DD OF DANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATE D	P/ ACADEMIC HONORS	
	(,	(,		From	То	(ii not graduated)	, , , , , , , , , , , , , , , , , , ,	RECEIVED	
ELEMENTARY	CABULIHAN ELEMENTARY SCHOOL	PRIMARY		2004	2010	N/A	2010	N/A	
SECONDARY	GUADALUPE NATIONAL HIGH SCHOOL	SECONDARY		2010	2014	N/A	2014	N/A	
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENC ENGINEERING		2014	2021	N/A	2021	N/A	
GRADUATE STUDIES		N/A		N/A	N/A	N/A	N/A	N/A	
	(Con	itinue on separate sheet if ne	cessary)					•	
SIGNATURE		TAL		DA	TE	Ja	nuary 19, 2022		

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IV. CIVIL SI	ERVICE ELI	GIBILITY							
27. CAREER		1080 (BOARD/ BAR) UNDER	RATING	DATE OF				LICENSE (if a	oplicable)
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFE	RMENT	NUMBER	Date of	
									Validity
BOARD OF CIVIL ENGINEER				11/14/2021	TACLOB	BAN CITY		0180590	12/7/2025
			(Conti	nue on separate sheet	t if necessary)				
	EXPERIENC								
		ent. Start from your rec	ent work) Descri	otion of duties sho	uld be indicated in the	attached Wo	ork Experien	ce sheet.	
_0.	SIVE DATES n/dd/yyyy)	POSITION T	ITLE DEPARTMENT / A		NCY / OFFICE / COMPANY	MONTHLY	PAY GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF	GOV'T
From	To	(Write in full/Do not	abbreviate)	(Write in full/Do not abbrev		SALARY		APPOINTMENT	SERVICE (Y/N)
							INCREMENT		
6/1/2015	7/31/2015	STUDENT AS	SITANT	VISAYAS ST	TATE UNIVERSITY	Php 775.00	N/A	CONTRACTUAL	Υ
8/1/2018	6/30/2019	STUDENT AS	SITANT	VISAYAS ST	ATE UNIVERSITY	Php 775.00	N/A	CONTRACTUAL	Υ
6/10/2019	7/22/2019	FIELD PRACT	TIONED	I ADV OF ASSIIM	IPTION ENTERPRISES	N/A	N/A	OJT	N
	1/22/2019	FIELD FRACI	IIONEK	LADI OF ASSUM	IF IION ENTERPRISES	N/A	N/A	031	IN
3/1/2021	5/31/2019	ENGINEERING	S AIDE 1	LADY OF ASSUM	IPTION ENTERPRISES	Php 5600.00	N/A	CONTRACTUAL	N
						1			
			Conti	nue on separate shee	t if necessary)				
SIGNA	TURF		ODINA.		DATE		Januar	y 19, 2022	
SIGNATURE		O O O O O O O O O O O O O O O O O O O			DAIL			212 (Revised 2017),	Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEME	NT IN CIVIC / NON-GOVERNI	MENT / PEOP	LE/VOLUN	TARY ORGA	NIZATION/S			
29. NAME & ADDRESS OF O			/E DATES l/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK			
PHILIPPINE INSTITUTE OF CIVIL ENGINEERS-VISAYAS UNIVERSITY STUDENT CHAPTER			2019			MEMBER		
PHILIPPINE INSTITUTE OF CIVIL ENGINEERS-VISAYAS UNIVERSITY STUDENT CHAPTER			2020			AUDITOR		
	,	ue on separate		• /				
VII. LEARNING AND DEVELOPMENT (L&	D) INTERVENTIONS/TRAININ	IG PROGRA	MS ATTEND	ED				
		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)			Type of LD			
30. TITLE OF LEARNING AND DEVELOPMENT INTE (Write in full)				NUMBER OF HOURS	(M anagerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)		
(which in tall)	l	From	To		Technical/etc)	(vine in idii)		
SUSTAINABLE INNOVATIONS FOR CLIMATE CHA	NGE ADAPTATION	11/9/2017	11/9/2017	5	EDUCATIONAL	PHILIPPINE INSTITUTE OF CIVIL ENGINEERS: VSU CHAPTER		
UNITE, ENGAGE, EM POWER:BUILDING TH TECHNOLOGICAL ADVANCEMENT,ECC SUSTAINABLE DEVELO	NOMIC PROGRESS AND	2/22/2018	2/22/2018	5	EDUCATIONAL	COLLEGE OF ENGINEERING AND TECHNOLGY VISAYAS STATE UNIVERSITY		
CIVL ENGINEERING PROFESSION: A CATALYST STRONG, SUSTAINABLE FUTU	FOR INNOVATION TOWARDS A	11/16/2018	11/16/2018	5	EDUCATIONAL	PHILIPPINE INSTITUTE OF CIVIL ENGINEERS VSU CHAPTER		
CE TALKS: A SEMINAR WITH AR. RAGLOF	RETO AND ENGR. HNMEJIA	1/31/2019	1/31/2019	5	EDUCATIONAL	PHILIPPINE INSTITUTE OF CIVIL ENGINEERS VSU CHAPTER		
2020 YOUNG CONSTRUCTION PROFESSIONA MICROSOFT TEMAS		12/15/2020	12/15/2020	5	LEADERSHIP	MAKATI DEVELOPMENT CENTER		
PERFORMING SOLID WASTE MANAGEMI	ENT IN THE WORKPLACE	12/28/2021	12/31/2021	48	TECHNICAL	TECHNICAL EDUCATION AND SKILLS DEVELOPMENT AUTHORITY		
VIII. OTHER INFORMATION	(Contin	ue on separate	sheet if necessa	ry)	_			
31. SPECIAL SKILLS and HOBBIES	NON-A	CADEMIC DISTIN	CTIONS / RECO	GNITION		MEMBERSHIP IN 33. ASSOCIATION/ORGANIZATION		
	32. (Write in full)					(Write in full)		
HIKING	N/A					N/A		
SWIMMING								
PLAYING GUITAR								
READING								
	(Contin	rue on separate	sheet if necessa	ry)				
SIGNATURE		AS _		DATE		January 19, 2022		
					CS EODM 242 (Pavisad 2047), Page 2 of			

134.	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 If YES, give detai	NO lis:						
35.	a. Have you ever been found guilty of any administrative of	YES If YES, give detai	NO						
	b. Have you been criminally charged before any court?	☐ YES							
36.	Have you ever been convicted of any crime or violation of a 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 retirement, dropped from the rolls, dismissal, termination, end 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 elements are a lection)?	YES If YES, give deta	NO NO						
	b. Have you resigned from the government service during last election to promote/actively campaign for a national or lo	☐ YES If YES, give deta	ills:						
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) Ma 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)								
а	Are you a member of any indigenous group?	☐ YES ☑ NO If YES, please specify:							
b	Are you a person with disability?	☐ YES ✓ NO If YES, please specify ID No:							
С	Are you a solo parent?		☐ YES If YES, please speci	☑ NO (y ID No:					
41.	REFERENCES (Person not related by consanguinity or affinity to a	pplicant /appointee)							
	NAME	ADDRESS	TEL. NO.						
_	JAMES ANDRE ARNAIZ	BAYBAY CITY, LEYTE	9319707215	(a)					
	RAYMUND M. IGCASAMA	BAYBAY CITY, LEYTE	9454698566						
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.								
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's cense, etc.) PLEASE INDICATE ID Number								
	overnment Issued ID: PRC ID	ODIAN)						
ID	/License/Passport No. 0180590	box)							
Da	ate/Place of Issuance: ORMOC CITY								
	SUBSCRIBED AND SWORN to before me this , affiant exhibiting his/her validly issued government ID as indicated above.								
	Person Administering Oath								