| CS Form No. 212<br>Revised 2017 | PERSO  | NAL DAT   | 'A SH   | IEE.                        | Т             |  |                   |   |  |  |
|---------------------------------|--|---|---|-----------------------------|---------------|--|-------------------|---|--|--|
|                                 | tion made in the Personal Data Sheet and the   | Work Experience Sheet sha                                   | ill cause the fill  | ing of admir                |               | iminal case/s age                                    | ainst the pers    | on concerned.                               |  |  |
|                                 | TO FILLING OUT THE PERSONAL DATA SHEE  ( ) and use separate sheet if necessary. Indicate N.  |   |   |                             | 1. CS ID No.  |  | (Do not fill t    | p. For CSC use only                         |  |  |
| . PERSONAL INFORMATIO           | )N   |   |   |                             |               |  |                   |   |  |  |
| 2. SURNAME                      | SAS  |   |   |                             |               |  |                   |   |  |  |
| FIRST NAME                      | CLARISSA MAE   |   |   | NAME EXTENSION (JR., SR)    |               |  |                   |   |  |  |
| MIDDLE NAME                     | LAROA  |   |   |                             |               |  | N/A               |   |  |  |
| 3. DATE OF BIRTH                | Contraction of the Contraction o | 16. CITIZENSHIP   |   | [7] em.                     | -lus [        | Dual Citizenship                                     |                   |   |  |  |
| (mm/dd/yyyy)                    | 05/20/2001   |   |   | ☑ Filip                     | pino _        |  | by natura         | dization                                    |  |  |
| 4. PLACE OF BIRTH               | MANTAHAN, MAASIN CITY  | If holder of dual citizenship, please indicate the details. |   | Pls. indicate of            |               |  |                   |   |  |  |
| 5. SEX                          | ☐ Male ☑ Female  |   |   |                             |               |  |                   |   |  |  |
| 6 CIVIL STATUS                  | Single Married   | 17. RESIDENTIAL ADDRESS                                     | T   | N/A                         |               | R  | . KANGLEO         |   |  |  |
| O CIVIL STATUS                  | ☐ Widowed ☐ Separated  | H   |   | use/Block/Lot No.<br>N/A    |               |  | Street            |   |  |  |
| r 4,                            | Other/s:   |   |   | bdivision/Village           | 9             | MANTAHAN<br>Barangay                                 |                   |   |  |  |
| 7. HEIGHT (m)                   | 1.60   |   |   | MAASIN<br>ity/Municipality  |               | Province   |                   |   |  |  |
| 8. WEIGHT (kg)                  | 54   |   |   | Supremissipality Provide    |               |  |                   |   |  |  |
| 9. BLOOD TYPE                   | B+   | 18. PERMANENT ADDRESS                                       |   | N/A R.                      |               |  |                   | N   |  |  |
| 10. GSIS ID NO.                 | N/A  |   | Hou   | House/Block/Lot No. N/A     |               |  |                   | Street<br>MANTAHAN                          |  |  |
| 10. GSIS ID NO.                 | N/A  |   | Sul   | bdivision/Village           | 9             | Barangay   |                   |   |  |  |
| 11. PAG-IBIG ID NO.             | N/A  |   | C   | MAASIN<br>City/Municipality |               |  |                   | SOUTHERN LEYTE Province                     |  |  |
| 12. PHILHEALTH NO.              | 13-253390356-1   | ZIP CODE  | 6600  |                             |               |  |                   |   |  |  |
| 13. SSS NO.                     | 06-4713327-5   | 19. TELEPHONE NO.   | N/A   | WA.                         |               |  |                   |   |  |  |
| 14. TIN NO.                     | 632-278-332-00000  | 20. MOBILE NO.  | 09095086501   |                             |               |  |                   |   |  |  |
| 15. AGENCY EMPLOYEE NO.         | N/A  | 21. E-MAIL ADDRESS (if any)                                 | sasclariss  | amae@g                      | mail.com      | l.   |                   |   |  |  |
| II. FAMILY BACKGROUND           |  |   |   |                             | 1000          |  |                   |   |  |  |
| 22. SPOUSE'S SURNAME            |  |   | 23. NAME of CHILDREN (Write full name and list all)  DATE OF BIRTH (mm/dd/yyyy) |                             |               |  |                   | RTH (mm/dd/yyyy)                            |  |  |
| FIRST NAME                      | N/A  | IAME EXTENSION (JR., SR)                                    |   |                             |               |  |                   | N/A   |  |  |
| MIDDLE NAME                     | N/A  |   |   |                             |               |  |                   |   |  |  |
| OCCUPATION                      | N/A  |   |   |                             |               |  |                   |   |  |  |
| EMPLOYER/BUSINESS NAME          | N/A  |   |   |                             |               |  |                   | -1  |  |  |
| BUSINESS ADDRESS                | N/A  |   |   |                             | Sello - 7     | 92 NO. 13  |                   |   |  |  |
| TELEPHONE NO.                   | N/A  |   |   |                             |               |  |                   |   |  |  |
| 24. FATHER'S SURNAME            | SAS  |   |   |                             |               |  |                   |   |  |  |
| FIRST NAME                      | FELIX  | NAME EXTENSION (JR., SR)                                    |   |                             |               |  |                   |   |  |  |
| MIDDLE NAME                     | PADILLA  | N/A   |   |                             |               |  |                   |   |  |  |
| 25. MOTHER'S MAIDEN NAME        |  | I NA  | -   |                             |               |  |                   |   |  |  |
|                                 | LAROA  |   |   |                             |               |  |                   |   |  |  |
| SURNAME                         |  |   | -   |                             |               |  |                   |   |  |  |
| FIRST NAME                      | LOLITA   |   |   |                             | 0             |  |                   |   |  |  |
| MIDDLE NAME                     | ORAG   |   |   | ((                          | Continue on s | eparate sheet if nece                                | ssary)            |   |  |  |
| III. EDUCATIONAL BACKG          | ROUND  |   |   |                             |               |  |                   |   |  |  |
| 26. LEVEL                       | NAME OF SCHOOL<br>(Write in full)  | BASIC EDUCATION/DEGR<br>(Write in full)                     | EE/COURSE   |                             | ATTENDANCE    | HIGHEST LEVEL/<br>UNITS EARNED<br>(if not graduated) | YEAR<br>GRADUATED | SCHOLARSHIP/<br>ACADEMIC HONORS<br>RECEIVED |  |  |
| ELEMENTARY                      | MAASIN CITY SPED CENTER  | ELEMENTARY EDUCATION  | ON  | From 2007                   | To 2013       | N/A  | 2013              | 2ND   |  |  |
| SECONDARY                       | SAINT JOSEPH COLLEGE   | SENIOR HIGH SCHOOL EDUCATION                                |   | 2017                        | 2019          | N/A  | 2019              | HIGH  |  |  |
| VOCATIONAL /                    |  |   |   |                             |               |  |                   | HONORS                                      |  |  |
| TRADE COURSE  COLLEGE           | VISAYAS STATE OF UNIVERSITY - MAIN   | BACHELOR OF SCIENCE IN BIOLO                                |   | 2019                        | 2023          | N/A  | 2023              | RA 7678 SCHOLARI MAGNA<br>CUM LAUDE         |  |  |
|                                 | CAMPUS   | MAJOR IN ZOOLOGY  |   |                             | 1570.0        |  | - CONTRACTOR      |   |  |  |
| GRADUATE STUDIES                |  | (Continue on separate sheet if ne                           | cessarvi  | L                           |               | L  |                   |   |  |  |
| SIGNATURE                       | Commune on separate sneet it necessary)  |   |   | DA                          | TE            | 01/  | 13/202            | 4   |  |  |
|                                 | <del>'</del>   |   |   |                             |               |  |                   | ised 2017), Page 1 of 4                     |  |  |

| 27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER RATING                    |                                    |                                      | DATE OF  |  |                                   |  | LICENSE (if applicable)  |                          |                    |
|--|------------------------------------|--------------------------------------|--|--|-----------------------------------|--|--------------------------|--------------------------|--------------------|
| BAF  | SPECIAL LAWS<br>RANGAY ELIGIBILITY | S/ CES/ CSEE<br>/ / DRIVER'S LICENSE | (If Applicable)  | EXAMINATION /<br>CONFERMENT                                    | PLACE OF EXAMINATION / CONFERMENT |  |                          | NUMBER                   | Date o<br>Validity |
|  |                                    |                                      |  |  |                                   |  |                          |                          |                    |
|  |                                    |                                      |  |  |                                   |  |                          |                          |                    |
|  |                                    |                                      |  |  |                                   |  |                          |                          |                    |
|  |                                    |                                      |  |  |                                   |  |                          |                          |                    |
|  |                                    | * "                                  | 1  |  |                                   |  |                          |                          |                    |
| -  |                                    |                                      |  | (Continue on sepa  | rate sheet if necessary)          |  |                          | 1.50                     | 7                  |
|  | XPERIENCE                          | Start from your recer                | nt work) Descri  | ntion of duties she  | ould be indicated in the attached | Work Experi  | ence sheet               |                          |                    |
| 28. INCLUSIVE DATES (mm/dd/yyyy) POSITION TITL (Write in full/Do not abl |                                    | E                                    | DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate) |  | MONTHLY<br>SALARY                 | SALARY/ JOB/ PAY<br>GRADE (if<br>applicable)& STEP<br>(Format "00-0")/ | STATUS OF<br>APPOINTMENT | GOVT<br>SERVIC<br>(Y/ N) |                    |
| From<br>/04/2023   | To 12/20/2023                      | PART-TIME INSTR                      | UCTOR  | DEPARTMENT OF BIOLOGICAL SCIENCES-<br>VISAYAS STATE UNIVERSITY |                                   | 19,868   | INCREMENT                | CONTRACT OF<br>SERVICE   | Y                  |
|  |                                    |                                      |  |  |                                   |  |                          |                          |                    |
|  |                                    |                                      |  |  |                                   |  |                          |                          |                    |
|  |                                    |                                      |  |  |                                   |  |                          |                          |                    |
|  |                                    |                                      |  |  |                                   |  |                          |                          |                    |
|  |                                    |                                      |  |  |                                   |  |                          |                          | -                  |
|  |                                    |                                      |  |  |                                   |  |                          |                          |                    |
|  |                                    |                                      |  |  |                                   |  |                          |                          |                    |
|  |                                    |                                      |  |  |                                   |  |                          |                          |                    |
|  |                                    | 11                                   |  |  |                                   |  |                          |                          |                    |
|  |                                    |                                      |  |  |                                   |  |                          |                          |                    |
|  |                                    |                                      |  | (Continue on sepa  | erate sheet if necessary)         |  |                          |                          |                    |
| SIGNATURE Office   |                                    |                                      |  | DATE   |                                   | 01/13/   | 2024                     | 017), Page 2             |                    |

| VI. VOLUNTARY WORK OR INVOLVEMENT IN  | CIVIC / NON-GOVERNMENT                                      | / PEOPLE /                                       | VOLUNTARY          | ORGANIZATI         | ON/S   |  |  |  |
|---|---|--|--------------------|--------------------|--|--|--|--|
| 29. NAME & ADDRESS OF ORGA<br>(Write in full)   | ANIZATION   | INCLUSIVE DATES (mm/dd/yyyy) From To             |                    | NUMBER OF HOURS    |  | POSITION / NATURE OF WORK  |  |  |
| PHILIPPINE RED CROSS- SOUTHERN LEYTE CHAPTER - ABGAO, MAASIN CITY<br>SOUTHERN LEYTE   |   |  | Present            |                    |  | VOLUNTEER  |  |  |
|   |   |  | e sheet if necessa | ny)                |  |  |  |  |
| VII. LEARNING AND DEVELOPMENT (L&D) II<br>Start from the most recent L&D/training program and include of                              |   |  |                    | lef Executive Mana | gerial positions)  |  |  |  |
| 30. TITLE OF LEARNING AND DEVELOPMENT INTERV (Write in full)  | ENTIONS/TRAINING PROGRAMS                                   | INCLUSIVE DATES OF<br>ATTENDANCE<br>(mm/dd/yyyy) |                    | NUMBER OF HOURS    | Type of LD<br>( Managerial/<br>Supervisory/                          | CONDUCTED/ SPONSORED BY (Write in full)  |  |  |
|   |   | From   | То                 |                    | Technical/etc)   |  |  |  |
| ZOONOSES AND WILDLIFE: ONE HEALTH, SPILLOVER, AND HUMAN ACTIVITY  |   |  | 12/15/2023         | 2                  | TECHNICAL  | THE PHILIPPINE SOCIETY OF PARASTOLOGY, INC., THE UNIVERSITY OF THE PHILIPPINES LOS<br>BAROS INSTITUTE OF BIOLOGICAL SCIENCES AND THE UNIVERSITY OF THE PHILIPPINES LOS<br>BAROS PROGRAM FOR ZOONOTIC DISEASES                  |  |  |
| WEBINAR ON S&T AGRI-AQUA BIOTECHNOLOGY APPLICATIONS   |   |  | 11/21/2023         | 3                  | TECHNICAL  | DEPARTMENT OF SCIENCE AND TECHNOLOGY (DOST), PHILIPPINE COUNCIL<br>FOR AGRICULTURE, AQUATIC AND NATURAL RESOURCES RESEARCH AND<br>DEVELOPMENT (PCAMED) IN COLLABORATION WITH UNIVERSITY OF THE<br>PHILIPPINES LOS BAÑOS (UPLS) |  |  |
| GENETIC TOOLS FOR CONSERVATION AND HEALTH: WHAT'S THE ROLE OF GENE DRIVES?  |   |  | 11/16/23           | 2                  | TECHNICAL  | OUTREACH NETWORK FOR GENE DRIVE<br>RESEARCH AND INTERNATIONAL SERVICE FOR<br>THE ACQUISITION OF AGRI-BIOTECH<br>APPLICATIONS   |  |  |
| NATIONAL RESEARCH COUNCIL DIVISION V SCIE   | INTIFIC SESSION   | 10/09/23   | 10/09/23           | 3                  | TECHNICAL  | NATIONAL RESEARCH COUNCIL-<br>RESEARCH AND DEVELOPMENT<br>MANAGEMENT DIVISION  |  |  |
| PAANO MAGSULAT PARA SA JOURNAL AT PAANO PUMILI NG JOURNAL?  |   |  | 09/08/2023         | 2                  | TECHNICAL  | MARK ANGELO BALENDRES  |  |  |
| PRE-EMPLOYMENT SEMINAR AND JOBS FAIR 2023   |   |  | 05/30/2023         | 6                  | TECHNICAL  | VISCA FRESHMAN BATCHES OF 1983 AND 1996, HOM SCHOOL ORACHLATES OF 1996, ALLIMIN<br>AND COMMUNETY RELATIONS OFFICE, OFFICE OF THE DEAN OF STUDENTS AND VISU ALLIMIN<br>ASSOCIATION FIC.   |  |  |
| PLANT PATHOLOGY AND SCIENTIFIC WRITING  |   | 05/01/2023                                       | 05/01/2023         | 4                  | TECHNICAL  | MARK ANGELO BALENDRES  |  |  |
| MOLECULAR EVOLUTIONARY ANALYSIS OF INDIGENOUS AN<br>CONTRIBUTING TO SUSTAINABLE AGRICULTURE IN SOUTHI<br>CHICKEN, PIGS & WILD ANIMALS | 03/09/2023  | 03/09/2023                                       | 4                  | TECHNICAL          | VISAYAS STATE UNIVERSITY- THE<br>OFFICE OF THE GRADUATE SCHOOL       |  |  |  |
| ON-THE-JOB TRAINING FOR BS BIOLOGY  |   |  | 08/12/2022         | 150                | TECHNICAL  | DEPARTMENT OF BIOLOGICAL SCIENCES  |  |  |
| TALENT BASKET TALK CAMPUS   |   | 06/22/22   | 06/22/22           | 4                  | TECHNICAL  | TALENT BASKET  |  |  |
| UNDERSTANDING HUMAN DEVELOPMENT AND C   | 10/08/2021  | 10/08/2021                                       | 4                  | TECHNICAL          | DEPARTMENT OF SCIENCE AND TECHNOLOGY-<br>SCIENCE EDUCATION INSTITUTE |  |  |  |
| THE FILIPINO BEHAVIOR AND ECONOMIC DEVEL<br>PANDEMIC: HOW RESILIENT IS IT?  | OPMENT DURING THE   | 09/24/2021                                       | 09/24/2021         | 4                  | TECHNICAL  | DEPARTMENT OF SCIENCE AND TECHNOLOGY-<br>SCIENCE EDUCATION INSTITUTE   |  |  |
| VIRTUAL STUDENT LEADERSHIP SUMMIT 1: "LEA<br>AGE"   | 09/11/2021  | 09/11/2021                                       | 6                  | TECHNICAL          | VISAYAS STATE UNIVERSITY-OFFICE<br>OF THE DEAN OF STUDENT            |  |  |  |
| UNDERSTANDING NATURAL HAZARDS IN THE PH   | HILIPPINES  | 09/10/2021                                       | 09/10/2021         | 4                  | TECHNICAL  | DEPARTMENT OF SCIENCE AND TECHNOLOGY-<br>SCIENCE EDUCATION INSTITUTE   |  |  |
| STRENGTHENING INDIVIDUAL AND FAMILY RESI  | 08/27/2021  | 08/27/2021                                       | 4                  | TECHNICAL          | DEPARTMENT OF SCIENCE AND TECHNOLOGY-<br>SCIENCE EDUCATION INSTITUTE |  |  |  |
| SCHOLARS' VALUES FORMATION PROGRAM  | 03/26/2021  | 03/26/2021                                       | 8                  | TECHNICAL          | DEPARTMENT OF SCIENCE AND TECHNOLOGY-<br>SCIENCE EDUCATION INSTITUTE |  |  |  |
| DEEPENING CIVIC LEADERSHIP AND HUMANITAF<br>SCHOLARS THROUGH SECTORAL INITIATIVES   | 11/20/2020  | 11/20/2020                                       | 4                  | TECHNICAL          | DEPARTMENT OF SCIENCE AND TECHNOLOGY-<br>SCIENCE EDUCATION INSTITUTE |  |  |  |
| VIII. OTHER INFORMATION   |   |  |                    |                    |  |  |  |  |
| 31. SPECIAL SKILLS and HOBBIES  | 32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) |  |                    |                    |  | 33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)   |  |  |
| READING, PHOTOGRAPHY, GRAPHIC DESIGN  |   |  |                    |                    |  | COUPLES FOR CHRIST-YOUTH FOR CHRIST<br>SOUTHERN LEYTE  |  |  |
| SIGNATURE   | munue on separal  | e sheet if necessa                               |                    | ATE                | 01/13/2024   |  |  |  |
|   |   |  |                    |                    | CS FORM 212 (Revised 2017), Page 3 of 4                              |  |  |  |

| 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 appointed,  |   |   |  |  |  |
|--|---|---|--|--|--|
| a. within the third degree?     b. within the fourth degree (for Local Government Unit - Ca  | YES NO YES NO If YES, give details:   |   |  |  |  |
| 35. a. Have you ever been found guilty of any administrative o   | YES V 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 any court or tribunal?   | ☐ YES ☑ NO If YES, give details:  |   |  |  |  |
| 37. Have you ever been separated from the service in any of t retirement, dropped from the rolls, dismissal, termination, (abolition) in the public or private sector?   | YES NO If YES, give details:  |   |  |  |  |
| a. Have you ever been a candidate in a national or local el Barangay election)?      b. Have you resigned from the government service during election to promote/(schicoly comparing for a national explanation).  | ☐ YES   |   |  |  |  |
| election to promote/actively campaign for a national or loca<br>39. Have you acquired the status of an immigrant or permanent  | If YES, give details:  YES VO If YES, give details (country):                                       |   |  |  |  |
| <ul> <li>40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972 a. Are you a member of any indigenous group?</li> <li>b. Are you a person with disability?</li> <li>c. Are you a solo parent?</li> </ul>             | If YES, please specify:  YES NO If YES, please specify ID No:  YES NO If YES, please specify ID No: |   |  |  |  |
| 41. REFERENCES (Person not related by consanguinity or affinity to applica   | nt /appointee)  |   |  |  |  |
| NAME   | ADDRESS   | TEL. NO.  |  |  |  |
| DARIUS NOEL C. MIÑOZA  JUSTINNE BENNETTE H. MILLADO  | VSU, VISCA BAYBAY CITY, LEYTE VSU, VISCA BAYBAY CITY, LEYTE   | (+63) 929-802-<br>2017<br>(+63) 921-572-  |  |  |  |
| FRETZELJANE O. POGADO  | VSU, VISCA BAYBAY CITY, LEYTE   | 5222<br>(+63) 946-514-  |  |  |  |
| 42. I declare under oath that I have personally accomplish<br>complete statement pursuant to the provisions of pert<br>Philippines. I authorize the agency head/authorized repres<br>agree that any misrepresentation made in this doc<br>administrative/criminal case/s against me. | inent laws, rules and regulations of the<br>sentative to verify/validate the contents state         | Republic of the clarification |  |  |  |
| 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  ID/License/Passport No.: 632-278-332-00000  Date/Place of Issuance: 18/08/2023   | ox)  Right Thumbmark  |   |  |  |  |
| SUBSCRIBED AND SWORN to before me this   | , affiant exhibiti  | ng his/her validly issued government ID as indicated above.   |  |  |  |
| <u> </u>   | Person Administering Oal  | h   |  |  |  |