CS Form No. 212 Revised 2017	PERSO	NAL DATA	SH	EE1	Γ				
concerned. READ THE ATTACHED GUIDE	tion made in the Personal Data Sheet and th	HEET (PDS) BEFORE ACCOMP	LISHING TH	IE PDS FO	RM.	/criminal case/s			
Print legibly. Tick appropriate boxes I. PERSONAL INFORMATIO	and use separate sheet if necessary. Indicate N	I/A if not applicable. DO NOT ABBR	EVIATE.		1. CS ID No.		(Do not fill up. F	or CSC use only	
2. SURNAME	DORON								
FIRST NAME	ARNEI					NAME EXTENSION (JR	L, SR)		
MIDDLE NAME	7111122								
3. DATE OF BIRTH	GUARTE								
(mm/dd/yyyy)	09/10/1987	16. CITIZENSHIP							
4. PLACE OF BIRTH	Cabulihan, Maasin So. Leyte	If holder of dual citizenship please indicate the details				ntry:			
5. SEX									
6 CIVIL STATUS		17. RESIDENTIAL ADDRESS	S block 11 lot 11 House/BlockLof No. Villa Soledad Subdivision/Village			Street Punta Barangay			
7. HEIGHT (m)	1.64			Baybay			Leyte		
8. WEIGHT (kg)	54	ZIP CODE	Cit	y/Municipality		6521	Province		
9. BLOOD TYPE	B+	18. PERMANENT ADDRESS		lock 11 lot 11 e/Block/Lot N			Street		
10. GSIS ID NO.	None	1	V	filla Soledad			Punta		
11. PAG-IBIG ID NO.	1212-0386-9362	-	Sub	division/Village Baybay				Barangay Leyte	
	13-025077100-3	ZIP CODE	City/Municipality 6521				Province		
12. PHILHEALTH NO. 13. SSS NO.	0111-8791776-9	19. TELEPHONE NO.		0021		None			
14. TIN NO.									
	416-001-938	20. MOBILE NO.	09424628491						
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)			arnel.dor	on@vsu.edu.	<u>ph</u>		
II. FAMILY BACKGROUND	D	22	NAME -COLL	II DDEN ANA	. 6.1	d Ked with	DATE OF DID	D.I. (ee ee felelike ee e	
22. SPOUSE'S SURNAME	Doron	NAME EXTENSION (JR., SR)	NAME of CH			a list all)		TH (mm/dd/yyyy)	
FIRST NAME	Diana		Niña Mae D. Doron Jandy D. Doron			29/01/2011			
MIDDLE NAME	Decena		<u> </u>						
OCCUPATION	housewife Angel Ren D. Doron				29/12/2020				
EMPLOYER/BUSINESS NAME	N/A								
BUSINESS ADDRESS	N/A								
TELEPHONE NO.	N/A								
24. FATHER'S SURNAME		NAME EXTENSION (JR., SR)							
FIRST NAME		TO SEE EXTENSION (SEC, ON)							
MIDDLE NAME									
25. MOTHER'S MAIDEN NAME									
SURNAME	Guarte								
FIRST NAME	Cerenia								
MIDDLE NAME	Cariño			(Co	ontinue on sep	parate sheet if neces	ssary)		
III. EDUCATIONAL BACKGI	ROUND							SCHOLARSHIP/	
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/C (Write in full)	COURSE	PERIOD OF F	TTENDANCE	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	ACADEMIC HONORS RECEIVED	
ELEMENTARY	Brgy. Cabulihan, Maasin Elementary School	primary		year 1994	year 2000		2000	None	
SECONDARY	Franciscan College of Immaculate Conception	secondary		year 2000	year 2004		2004	None	
VOCATIONAL / TRADE COURSE	Franciscan College of Immaculate Conception	Nursing Aide		year 2004	year 2006		2006	None	
COLLEGE									
GRADUATE STUDIES									

SIGNATURE

DATE

September 16, 2022

	RVICE ELIGIE							LIOENOE #	anlin-t-l	
SPECIAL LAWS/ CES/ CSEE (If Applicable)			RATING (If Applicable)	DATE OF EXAMINATION / PLACE OF EXAMINATION / CONFERMENT				LICENSE (if applicable) Date of		
BAR	RANGAY ELIGIBILI	TY / DRIVER'S LICENSE	(II Applicable)	CONFERMENT				NUMBER	Validity	
WORK F	XPERIENCE		(Co	ntinue on separate sheet	if necessary)	_	_	_	-	
		nt. Start from your recen	t work) Descriptio	n of duties should b	e indicated in the attache	ed Work Exp	erience sheet.			
. INCLU	SIVE DATES					MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOVT	
	n/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)		DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)		applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVICI (Y/ N)	
From	To			V011.0	Conton (Maril 4	40"	"AOUSTNEW!	1.1.6.1		
	31/12/2019	Computer Op			Center (Market area)	40/hour		Job Order	N	
/01/2020	31/12/2021	Laboratory Te	chnician	VSU Civil Eng	ineering Department	553.40/day		Job Order	Y	
/07/2022	Present	Laboratory Tee	chnician	VSU Civil Eng	ineering Department	553.40/day		Job Order	Y	
			(Co	ntinue on separate sheet	if necessary)		ı			
	TURE	\ _	_	7 Ç	DATE	l	September 16, 2	022		

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S								
29.	NAME & ADDRESS OF OF (Write in full)			/E DATES d/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK		
			110					
			tinue on separate					
VII. LEA	ARNING AND DEVELOPMENT (L&D)	INTERVENTIONS/TRAINING PI	1					
30.	TITLE OF LEARNING AND DEVELOPMENT INTE	RVENTIONS/TRAINING PROGRAMS	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
	(Write in full)							
			From	То				
-								
		(Con	tinue on separate :	sheet if necessary)				
VIII. OT	HER INFORMATION	(001)	- ooparate	y)				
31.	SPECIAL SKILLS and HOBBIES	32. NON	-ACADEMIC DISTIN		NITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION	
3			(Write	e in full)			(Write in full)	
	computer repair							
	baking							
L								
		(Con	tinue on separate :	sheet if necessary)				
	SIGNATURE	1				ATE	September 16, 2022	
							CS FORM 212 (Revised 2017), Page 3 of 4	

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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?						
	b. within the fourth degree (for Local Government Unit - Car	If YES, give details:					
35.	a. Have you ever been found guilty of any administrative of	fense?	If YES, give details:	:			
	b. Have you been criminally charged before any court?		If YES, give details: Date Filed: Status of Case/s:	:			
36.	Have you ever been convicted of any crime or violation of a any court or tribunal?	iny law, decree, ordinance or regulation by	If YES, give details:	:			
37.	Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, to in the public or private sector?		If YES, give details:				
38.	a. Have you ever been a candidate in a national or local ele Barangay election)?		If YES, give details:				
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	I candidate?	If YES, give details:				
39.	Have you acquired the status of an immigrant or permanen	t resident of another country?	If YES, give details (country):				
40. a.	and (c) Solo Parents Welfare Act of 2000 (RA 8972), please Are you a member of any indigenous group?	If YES, please specify:					
b. c.	Are you a person with disability? Are you a solo parent?		If YES, please specify ID No:				
41			If YES, please specify	ID No:			
41.	REFERENCES (Person not related by consanguinity or affinity to applica		TEL 110				
	NAME NAME	ADDRESS	TEL. NO.				
	Nancy D. Abunda	Visayas State University		100			
	Dilberto O. Ferraren	Visayas State University					
42.			РНОТО				
P G II	Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: driver's license D/License/Passport No.: H12-11-000236 Date/Place of Issuance: October 11, 2019	ox)	Right Thumbmark				
	SUBSCRIBED AND SWORN to before me this	ng his/her validly issued go	overnment ID as indicated above.				
		h					