VISAYAS STATE UNIVERSITY PERSONAL DATA SHEET







1. SURNAME A L M E Ñ E											
FIRST NAME	C H A R L E S K E V I N										
MIDDLE NAME	G U A L	A R A 2. NAME EXTENSI			XTENSION (e.g. Jr	., Sr.)	NONE				
3. DATE OF BIRTH (mm/dd/yyyy) 01/15/1999			11. PRESENT ADDR	ESS							
4. PLACE OF BIRTH	ORMOC CITY					Kelbourne	Drive, Ap	oartment 77, Vis	ca, Baybay	City	
5. SEX	☑ Male ☐ Fema	le									
6. CIVIL STATUS	☑ Single ☐ Wide	owed		12. ZIP CODE		6521					
	☐ Married ☐ Sepa	arated		13. TEL. NO./CEL. N	0.	09630515768					
	☐ Annulled ☐ Oth	ners, specify	_	14. PHILHEALTH NO	1325 0702 4487						
7. CITIZENSHIP	FILIPINO	9. WEIGHT (kg)	68	15. TIN	768 450 270 000						
8. HEIGHT (m)	1.67	10. BLOOD TYPE		16. PAG-IBIG ID NO.		121300302793					
17. SPOUSE'S SURNAME		N/A		18. NAME OF CH		ILD (Write full name and list all)			DATE OF BIRTH (mm/dd/yyyy)		
FIRST NAME						N/A	4		N/A		
MIDDLE NAME	ATTAINMENT			/O							
19. HIGHEST EDUCATIONAL		[] Elementary (Grade / Graduated)									
(Please check and unde		[] High School (1st, 2nd, 3rd, 4th, Graduated)									
(Tiease theth and unde	1 2 /	[/] College (1st, 2nd, 3rd, 4th, 5th Graduated) Degree: BS in Civil Engineer									
20. CAREER SERVICE ELIGI	BILITY	□ Professional		Sub-Profession	onal	□ Ot	hers, Sp	pecify:			
WORK EXPERIENCE 21. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full)		E			SALARY (Daily or Monthly)	STATUS OF APPOINTMENT (Perm/Temp/ Job Order)	GOV'T SERVICE (Yes / No)		
From	То			(
07/01/2019	07/31/2019	019 ON THE JOB TRAINI			MAC BUILDERS 150 per day			150 per day	Temporary	No	
22. SPECIAL SKILLS		Proficiency (Please check)									
(i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)		Highly Skilled Aver		age		Fair	Fair		REMARKS		
Computer Skills				/	•						
Problem Solving				/	,						
Project Manage			/	,							
Teamwork		/									
Technical Si			/	•							
23. RELEVANT TRAININGS S		INCLUSIVE DATES OF ATTI (mm/dd/yyyy)			NUMBER OF	HOURS CONDU			CTED/ SPONSORED BY		
(Write i		From		То					(Write in full)		
Training-Workshop on Risk Assessment		11/24/2022	1	1/25/2022	16 hours		VSU, Visca, Baybay City, Leyte		City, Leyte		
48th PICE National Convention and Technical Conference		11/11/2022	1	1/12/2022	16 hours		PICE				
Training for the Accreditation of Constructor's Performance Evaluators		11/23/2022	1	1/23/2022	8 hours		VSU, Visca, Baybay City, Leyt		City, Leyte		
Workshop for Part III and IV of the Land Use Development and Infrastructure Plan (LUDIP)		7/19/2022	-	7/20/2022	16 hours		VSU, Visca, Baybay City, Leyt		City, Leyte		
Training - Workshop on Root Cause Analysis		10/17/2022	1	0/18/2022	16 hours		VSU, Visca, Baybay City, Leyte				
I hereby declare that this Personal Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines.											
24. COMMUNITY TAX CERTIFICATE I	NO. 19062850	ISSUED AT:	LGl	J MERIDA	ISSUED ON (mm/d	d/yy):	01/05/20	24			
SIGNATURE: DATE ACCOMPLISHED: (mm/dd/yyyy)01/10/2024											
\mathcal{L}											

IV. CIVIL S	SERVICE ELIG	GIBILITY						
29. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE/ TESDA/NCC			RATING	DATE OF EXAMINATION /	PLACE OF EXAMINAT	LICENSE (if applicable)		
			RATING	CONFERMENT	PLACE OF EXAMINAT	ION / CONFERMENT	NUMBER	DATE OF RELEASE
	_	_	(C	ontinue on separate	e sheet if necessary)	_	-	
1 1	1 1							
1 1	1 1							
1 1	1 1							
1 1	1 1							
1 1	1 1							
1 1	1 1							
1 1	1 1							
1 1	1 1							
1 1	1 1							
1 1	1 1							
1 1	1 1							
1 1	1 1							
1 1	1 1							
1 1	1 1							
1 1	1 1							
1 1	1 1							
1 1	1 1							
		1	(C	ontinue on separate	e sheet if necessary)	L	<u> </u>	

VI. SPECIAL SKILLS								
31. SPECIAL SKILLS		Proficiency						
(i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)	Highly Skilled	Average	Fair					
(Continue	e on separate sheet if	necessary)						
VII. TRAINING PROGRAMS (Start from the most recent tra	nining.)							
32. TITLE OF SEMINAR/CONFERENCE/WORKSHOP/SHORT COURSES (Write in full)	INCLUSIVE DATES (mm/do		NUMBER OF HOURS	CONDUCTED/ SPONSORED BY (Write in full)				
12.1,	From	То	1100110	(**************************************				
	1 1	1 1						
	1 1	1 1						
•	on separate sheet if	necessary)						
 36. Are you related by consanguinity or affinity to any of the following: a. Within the third degree with the appointing authority, recommending authority, chief of office/bureau/department or person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed? 								
(Continue on separate sheet if necessary)								
(Continue	on separate sneet if	necessary)		CS FORM 212 (Revised 2005), Page 3 of 4				

VI. S	PECIAL SKILLS								
22. SPECIAL SKILLS (i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)									
			Highly Sł	illed	Average	Fair	REMARKS		
VII.	TRAINING PROGRAMS (Start from the n	nost recent training.)							
			INCLUSIVE DATES OF						
23.	TITLE OF SEMINAR/CONFERENCE/WORKS (Write in full)	HOP/SHORT COURSES	ATTENDA (mm/dd/y		NUMBER OF HOURS	CONDUCTED/ SPON (Write in full			
	(vviite iii iuii)		From	То	1100113	(Wille III luii)			
			1 1	1 1					
			1 1	1 1					
24. 🖊	Are you related by consanguinity or								
а	ffinity to any of the following :								
	Vithin the third degree with the appoint								
	ecommending authority, chief of office/		YES NO						
or person who has immediate supervision over you in the Office,Department/Project where you will be appointed?			If YES, give details:						
25. R	REFERENCES (Person not related by consanguin		· · · · · · · · · · · · · · · · · · ·						
	NAME	ADDRESS	TEL. NO).					
						PLEASE PASTE an ID picture taken within	e taken within		
						the last 6 months (1"X1" or 2" x 2" or Passport S	Size)		
						(REQUIRED)			
	declare under oath that this Personal I								
	s a true, correct and complete statemer ules and regulations of the Republic of		isions of pertine	ent laws,					
	are and regulations of the respublic of	шет ппррпос.							
I also authorize the agency head / authorized representative to verify / validate the									
contents stated herein. I trust that this information shall remain confidential.					PHOTO				
_									
	COMMUNITY TAX CERTIFICATE NO.								
Г									
ISSUED AT SIGNATURE (S			Sign inside the box)						
	/ / ISSUED ON (mm/dd/yyyy)	DATE AC	COMPLISHED			RIGHT THUMBMARK	j		
L	1000ED ON (IMITIOUS SYSY)	DATERO	OOMI LIGHED			(REQUIRED)			
							Page 2 of 2		