VISAYAS STATE UNIVERSITY PERSONAL DATA SHEET

PLEASE PASTE an ID picture taken within the last 6 months (2" x 2" or Passport Size)

		-		ob Order V				(REQL	IIRED)		
Print legibly. Mark appr	ropriate boxes \(\square\)	rith " ☑ " and us	e sep	parate sheet if	necessary.						
1. SURNAME	BOLE	CHIEI									
FIRST NAME	J O A N A H L O U I E L A										
MIDDLE NAME	O R A P	A	1	1 1 1	1 1 1	2. NAME E	EXTENSION (e.g. Jr.,	Sr.)			
3. DATE OF BIRTH (mm/dd/yyyy	10/21/1995			11. PRESENT ADDRESS			-				
4. PLACE OF BIRTH	TACLOBAN CITY			В			BGY. MASLUG, BAYBAY CITY, LEYTE				
5. SEX	☐ Male ☐ Female										
6. CIVIL STATUS	☐ Single ☐ Widowed ☐ Married ☐ Separated		12. ZIP CODE			6521					
			13. TEL. NO /CEL. NO.			093541	45564				
	☐ Annulled ☐		14. PHILHEALTH N		0.	13-0254			94812-9		
7. CITIZENSHIP	FILIPINO	9. WEIGHT (kg)		15. TIN	5. TIN		723-65	1-962	-962		
8. HEIGHT (m)		10. BLOOD TYPE	В	16. PAG-IBIG ID NO	l.		121230	113607			
17. SPOUSE'S SURNAME		N/A		18. NAME OF CHILD (Write full name			stall)	DATE OF E	SIRTH (mm/dd/yyyy)		
FIRST NAME	N/A					N/A	N/A		N/A		
MIDDLE NAME		N/A		N/A			N/A				
19. HIGHEST EDUCATIONA (Please check and und		[] High :	Schoo lege (*	y (Grade / I (1st, 2nd, 3rd, 4th, 6 : BS IN MANAGEN	n, Graduated)						
20. CAREER SERVICE ELIC	☐ Professional ☐ Sub-Profession		onal \square		Others, Specify:						
WORK EXPERIENCE INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full)		DEPARTMENT / AGENCY / OFFICE / COMPANY /PROJECT (Write in full)		SALARY (Daily or Monthly)	STATUS OF APPOINTMENT (Perm/Temp/ Job Order)	GOVT SERVICE (Yes / No)			
01 / 01 / 2023	To PRESENT	ADMINISTRA	ATIVE	AIDE III	ACCOUNTING OFFICE VISAYAS STATE UNIVERSITY		603.40 DAILY	JO	NO		
02 / 02 / 2022	12 / 31 / 2022	ADMINISTRATIVE AIDE I			ACCOUNTING OFFICE VISAYAS STATE UNIVERSITY 553.40 DAIL		553.40 DAILY	JO	NO		
07 / 20 / 2020	01 / 20 / 2021	CENSUS ARE	A SUF	PERVISOR		E STATISTICS Y - LEYTE PSO	15,000	MOA	NO		
2				Proficiency	(Please che	eck)					
SPECIAL SKILLS (i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)		Highly Skilled		Average		Fair		REMARKS			
COMPUTER SKILLS (MS OF	FICE, ETC.)			_							
ORAL AND WRITTEN COMM	NUNICATION SKILLS										
	S SEMINAR/WORKSHOP	INCLUSIVE DATE (mm/	S OF A		NILWOFF OF	Tours	CONDUC	TED/ SPONSORE	D BY		
ATTENDED (Write in full)		From		То	NUMBER OF	HOURS	(W		Write in full)		
ISO 9001:2015 AWARENESS/RE-AWARENESS SEMINA		08 / 30 / 2022		08 / 31 / 2022	8	8		VISAYAS STATE UNIVERSITY			
HANDS-ONLY CARDIOPULMONARY RESUSCITATION		07 / 21 / 2022		07 / 22 / 2022	4		DEPARTMENT		OF HEALTH - HEM AND VSU		
4TH LEVEL TRAINING ON 2020 CENSUS ON POPULATION AND HOUSING		08 / 10 / 2020		08 / 10 / 2020 48			PHILIPPINE STATISTICS		ICS AUTHORITY - LEYTE PSO		
3RD LEVEL TRAINING ON 2020 CPH		07 / 20 / 2020		07 / 25 / 2020	/ 25 / 2020 48 PHILIPPII		PHILIPPINE STATIS	STATISTICS AUTHORITY - LEYTE PSO			
GLOBAL COMMUNICATIONS TRAINING		03 / 25 / 2019 04 / 28 / 201		04/28/2019	160 EPERFO		EPERFORMAX I	MAX BPO AND CONTACT CENTER			
I hereby declare that this pertinent laws, rules and				by me, and is a	true, correct	and complete sta	itement pursua	nt to the pro	visions of		
24. COMMUNITY TAX CERTIFICATE	ENO. 18930684	DATE ACCOMPLISHED: (m		AYBAY CITY	_ISSUED ON (mm	/dd/yy):JANUAR	Y 10, 2023	4			

IV. CIVIL SEI	RVICE ELIGIB	ILITY							
27. CAREER S	SERVICE/ RA 1080	(BOARD/ BAR) UNDER SPECIAL	RATING	DATE OF EXAMINATION				LICENSE (if ap	plicable)
LAND OF CLOSEF DADANCAV			(If Applicable)	/ CONFERMENT	ION / CONFERM	IENT	NUMBER	Date of Validity	
Civil Service Professional Examination			87.7	4/1/2016	Tacloban City				
V. WORK EX	PERIENCE			Continue on separate sheet if	necessary)		746		
		Start from your recent wo	rk) Description of	duties should be indicat	ed in the attached Work Ex	operience sh	eet.		
	JSIVE DATES m/dd/yyyy)	POSITION TI	ΠF	DEPARTMENT / AGE	NCY / OFFICE / COMPANY	MONTHLY	SALARY/ JOB/ PAY GRADE (if	STATUS OF	GOVT
	To	(Write in full/Do not a			(Write in full/Do not abbreviate)		applicable)& STEP (Format "00-0")/ INCREMENT	APPOINTMENT	SERVICE (Y/N)
From			- A:J-	Accounting Off	Accounting Office, Visayas State				
02/02/2022	present	Administrativ		University		P 10,000		JO	N
07/20/2020	10/15/2020	Census Area Su	Census Area Supervisor		Philippine Statistics Authority -Leyte			contractual	N
03/25/2019	1/15/2020	Customer Service	Consultant	ePerformax BPO	P20,000		contractual	N	
1/4/2018	06/30/2018	Administrativ	Administrative Aide		Department of Social Welfare and Development			MOA	Υ
1/8/2017	09/30/2017	Field Enume	rator	Adventist Developr	P12,000		contract	N	
1/2/2017	05/28/2017	Student Assi	stant	Teaching and Learni	P 1,800		part-time	N	
1/2/2011	00/20/2011	Stadont Ass		Taclob	an College				
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				-					
				-					
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				(Continue or const. 1. 1.	Pagace and				
SIGN	ATURE		Malihe	(Continue on separate sheet if	DATE		04/25/	2022	
GIGIN	UNL		mache	1		<u> </u>	511501	CS FORM 212 (Revised	2017), Page 2 of 4
									" -9 31

VI. SPECIAL SKILLS 22 SPECIAL SKILLS		Proficiency (Please check)				
(i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)	Highly	Skilled	Average	Fair	REMARKS	
VII. TRAINING PROGRAMS (Start from the most recent training.)						
	INCLUSIVE	DATES OF				
23. TITLE OF SEMINAR/CONFERENCE/WORKSHOP/SHORT COURSES (Write	ATTENE (mm/dd		NUMBER OF	CONDUCTED/ SPO		
in full)	From To		HOURS	(Write in	ruli)	
	Troin -	10				
·						
	, ,	1 , ,				
	/ /	1 1				
24. Are you related by consanguinity or	1 1	1 1				
Office,Department/Project where you will be appointed?	If YES, give deta	ills:				
25. REFERENCES (Person not related by consanguinity or affinity to applicant / ap	pointee)					
NAME ADDRESS	TEL.	NO.				
Michael Pudolph B. Falle Head Census Area	91710	62588	1	PLEASE PASTE an		
Louella C. Ampac Supervisor PSA-Tacloban Finance Director, VSU	91754		1	ID picture taken within the last 6 months		
Mary Ellen Ambos Team Lead, Cebu City	99884		1	(1"X1" or 2" x 2" or Passport Size) (REQUIRED)		
I declare under oath that this Personal Data Sheet has been at a true, correct and complete statement pursuant to the provision and regulations of the Republic of the Philippines.	ccomplished by ons of pertinen	y me, and is t laws, rules				
I also authorize the agency head / authorized representative to contents stated herein. I trust that this information shall rema	verify / valida in confidential.	te the		РНОТО		
				·		
COMMUNITY TAX CERTIFICATE NO.	ralishe					
ISSUED AT SIGNATURE	(Sign inside the box]			
	25-2023		1			
			RIGHT THUMBMARK			
ISSUED ON (mm/dd/yyyy) DATE A	CCOMPLISHED			RIGHT THUMBMARK		