SIGNATURE

PERSONAL DATA SHEET

WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned. READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. Print legibly. Tick appropriate boxes) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 1. CS ID No. (Do not fill up. For CSC use only PERSONAL INFORMATION 2. SURNAME Magallon NAME EXTENSION (JR., SR) N/A FIRST NAME Yvonn Kyla MIDDLE NAME Villasan 3. DATE OF BIRTH 16. CITIZENSHIP 07/07/1999 (mm/dd/yyyy) ✓ Filipino Dual Citizenship by birth by naturalization Pls. indicate country: 4. PLACE OF BIRTH Pastrana, Leyte If holder of dual citizenship, please indicate the details **✓** Female 5. SEX Male 17 RESIDENTIAL ADDRESS ✓ Single Married Zone IV 6 CIVIL STATUS House/Block/Lot No Street Widowed Separated Bahav Other/s: Subdivision/Village Baranga Pastrana Leyte 7. HEIGHT (m) 1.48 Citv/Municipality Province 8. WEIGHT (kg) ZIP CODE 6514 50 18. PERMANENT ADDRESS Zone IV 9. BLOOD TYPE В+ House/Block/Lot No. Street Bahay 10. GSIS ID NO. N/A Subdivision/Village Barangay Pastrana Leyte 11. PAG-IBIG ID NO. 121326794174 City/Municipality Province 12 PHILHEALTH NO 13-250848295-0 ZIP CODE 6514 06-4496348-0 19. TELEPHONE NO. 13. SSS NO. N/A 14. TIN NO. 09950033836 635-432-118-00000 20. MOBILE NO 15. AGENCY EMPLOYEE NO. N/A 21. E-MAIL ADDRESS (if any) yvonn.magallon@vsu.edu.ph FAMILY BACKGROUND 23. NAME of CHILDREN (Write full name and list all) 22. SPOUSE'S SURNAME N/A DATE OF BIRTH (mm/dd/yyyy NAME EXTENSION (JR., SR) N/A FIRST NAME N/A N/A N/A MIDDLE NAME N/A N/A N/A OCCUPATION N/A N/A N/A EMPLOYER/BUSINESS NAME N/A N/A N/A **BUSINESS ADDRESS** N/A N/A N/A N/A N/A TELEPHONE NO. N/A N/A 24. FATHER'S SURNAME Magallon NAME EXTENSION (JR., SR) N/A FIRST NAME Rogelio N/A N/A N/A MIDDLE NAME Tado N/A 25. MOTHER'S MAIDEN NAME N/A N/A Villasan N/A SURNAME N/A FIRST NAME N/A Luciña MIDDLE NAME Bariñan (Continue on separate sheet if necessary) **EDUCATIONAL BACKGROUND** LEVEL/ PERIOD OF ATTENDANCE 26 NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR P/ ACADEMIC LEVEL UNITS GRADUATED (Write in full) (Write in full) HONORS EARNED From То RECEIVED ELEMENTARY **Bahay Elementary School** 2005 2011 2011 **Primary Education** N/A First Honors Juan Villablanca Memorial High With High SECONDARY High School and Senior High School 2011 2018 N/A 2018 School Honors VOCATIONAL / Certificate of Leyte Academic Center Software Development 2016 2017 N/A 2017 TRADE COURSE Training Bachelor of Science in Information COLLEGE Eastern Visayas State University 2018 2022 N/A 2022 Cum Laude Technology **GRADUATE STUDIES** N/A N/A N/A N/A N/A (Continue on separate sheet if necessary

01/10/2025

DATE

IV. CIVIL SERVICE ELIGIBILITY									
	27 CAREER SERVICE/ RA 1080 (BOARD) BAR) LINDER DATE OF						LICENSE (if applicable)		
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			RATING (If Applicable)	EXAMINATION / CONFERMENT	ON / CONFERMENT		NUMBER	Date of Validity	
Career Service Professional PD 907 - Honor Graduate			N/A	01/31/2023	CSC RO VIII			N/A	N/A
Graduate									
V. WORK E	EXPERIENC	E	(Continu	ie on separate sheet if n	ecessary)	-	-		-
		ment. Start from your	recent work) Des	cription of duties s	should be indicated in	the atta		Experience s	heet.
	28. INCLUSIVE DATES (mm/dd/yyyy) POSITION TITLE (Write in full/Do not abbrev					MONTHLY	SALARY/ JOB/ PAY GRADE (if applicable)&	STATUS OF	GOV'T SERVICE
			abbreviate)	(Write in full/D	SALARY	STEP (Format "00- 0")/ INCREMENT	APPOINTMENT	(Y/N)	
08/03/2022	05/31/2023	Teacher		St. Joseph High S	School of Dagami Inc.	7684.56	N/A	Contractual	N
08/16/2023	12/27/2024	Part-time Inst	ructor	Department of Computer Visayas St	er Science and Technology, tate University	21840	SG - 9	Contractual	Υ
		Н	\sim	ue on separate sheet if n			l		
SIGNA	TURE		rgalog)		DATE		1/10/2025 CS FG	ORM 212 (Revised 20	17), Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S						
INCLUSIVE DATES						
29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS		POSITION / NATURE OF WORK	
N/A	N/A	N/A	N/A		N/A	
N/A	N/A	N/A	N/A		N/A	
N/A	N/A	N/A	N/A		N/A	
N/A	N/A	N/A	N/A		N/A	
N/A	N/A	N/A	N/A		N/A	
N/A	N/A	N/A	N/A		N/A	
N/A	N/A	N/A	N/A		N/A	
VII. LEARNING AND DEVELOPMENT (L&D)			neet if necessary) NG PROGRAI	MS ATTENDED		
(Start from the most recent L&D/training program and inclu	ude only the releva	ant L&D/training				
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE ATTENI (mm/dd From	DANCE	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/	CONDUCTED/ SPONSORED BY (Write in full)	
Special Program for Employment of Students	05/07/2018	06/04/2018	160	Technical/etc) Supervisory	Department of Labor and Employment	
Special Program for Employment of Students	06/28/2021	07/26/2021	160	Supervisory	Department of Labor and Employment	
Python Essentials Programming	09/23/2021	10/01/2021	30	Technical	Department of Information and Communications Technology	
Data-Driven Governance	04/04/2022	04/08/2022	20	Supervisory	Department of Information and Communications Technology	
					Communications recliniology	
VIII. OTHER INFORMATION	(Contin	ue on separate si	neet if necessary)			
31. SPECIAL SKILLS and HOBBIES	NON-		NCTIONS / RECOG e in full)	MEMBERSHIP IN 33. ASSOCIATION/ORGANIZATION (Write in full)		
Graphic Designing		1	N/A	N/A		
Video Editing			N/A	N/A		
Public Speaking	N/A				N/A	
Writing			N/A	N/A		
Painting			N/A	N/A		
Calligraphy	N/A				N/A	
Programming			N/A	N/A		
SIGNATURE (Continue on separate sheet if necessary) DATE 1/10/2025						
SIGNATURE	Ngg	Jan	DF	1 / L	I/10/2023 CS FORM212 (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 immedia. Bureau or Department where you will be apppointed,					
	a. within the third degree?		☐ YES ☑ NO			
	b. within the fourth degree (for Local Government Unit - C	areer Employees)?	☐ YES ☑ NO			
			If YES, give details:			
35	a. Have you ever been found guilty of any administrative	☐ YES ☑ 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:				
	Have you are been populated of any original or rightform					
36.	Have you ever been convicted of any crime or violation o regulation by any court or tribunal?	YES V N	0			
	5 , ,	If YES, give details:				
37.	Have you ever been separated from the service in any of	YES NO				
	resignation, retirement, dropped from the rolls, dismissal,	If YES, give details:				
	finished contract or phased out (abolition) in the public or		-			
38.	a. Have you ever been a candidate in a national or local (except Barangay election)?	125				
		m the three (2) ments revised	If YES, give details:			
	b. Have you resigned from the government service during before the last election to promote/actively campaign for a		☐ YES			
39.	Have you acquired the status of an immigrant or p	ermanent resident of another	☐ YES 🔽	NO		
	country?		If YES, give details (coun			
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) M Persons (RA 7277); and (c) Solo Parents Welfare Act of 2					
a.	Are you a member of any indigenous group?	.000 (IVA 0372), piedse diiswei	☐ YES 🔽	NO		
			If YES, please specify:			
b.	Are you a person with disability?		☐ YES ☑ NO If YES, please specify ID No:			
C.	Are you a solo parent?		☐ YES 💌	NO		
			If YES, please specify ID No	:		
41.	REFERENCES (Person not related by consanguinity or affinity to applicant /a	appointee)		V/8123		
	NAME	ADDRESS	TEL. NO.			
	Raymond M. Daylo	Eastern Visayas State University	raymond.daylo@evs u.edu.ph	100		
	Alejo Ogania	MICPICT	alejo.ogania@prc.go v.ph	-3		
	Sr. Mildred Cruza, OSF	St. Joseph High School of Dagami, Inc.	09171806805			
42.	I declare under oath that I have personally accomplish		which is a true,			
	correct and complete statement pursuant to the provision	-	- Y	VONN KYLA VMAGALLON		
	Republic of the Philippines. I authorize the agency head, contents stated herein. I agree that any misreg	authorized representative to ve presentation made in this doc		PHOTO		
	attachments shall cause the filing of administrative/crimina		amont and to			
G	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License,	1 /				
eto						
G	overnment Issued ID: Philippine Identification Card	(ragar				
ID/License/Passport No.: 3019-2372-6184-5049 Signature			ne box)			
Da	ate/Place of Issuance: 05/14/2022	1/10/2025 Date Accomplishe		Right Thumbmark		
		Zaa /toonpisite		. aga		
SUB	SCRIBED AND SWORN to before me this	, affiant exhibiting his/her validly is:	sued government ID as indicated	l above.		
		Person Administering	Oath			