## CS Form No. 212 Revised 2017 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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM 1. CS ID No. Print legibly. Tick appropriate boxes ( ) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use only 2. SURNAME DIAO NAME EXTENSION (JR., SR) FIRST NAME JOHN MARTIN MIDDLE NAME ALEA 3. DATE OF BIRTH 14/12/1996 16. CITIZENSHIP √ Filipino Dual Citizenship by birth by naturalization 4. PLACE OF BIRTH PALO, LEYTE If holder of dual citizenship, Pls. indicate country: please indicate the details 5. SEX ✓ Male Female 17. RESIDENTIAL ADDRESS Single Married 6 CIVIL STATUS House/Block/Lot No. Widowed Separated PUROK 1 STA. CRUZ Other/s: Subdivision/Village BAYBAY LEYTE 7. HEIGHT (m) 1.78 m Citv/Municipality Province 8. WEIGHT (kg) ZIP CODE 56 kg M.L. QUEZON 18. PERMANENT ADDRESS 425 9. BLOOD TYPE A House/Block/Lot No **ZONE - 18** 10. GSIS ID NO. NONE Subdivision/Village Barang **BAYBAY LEYTE** 11 PAG-IRIG ID NO 121236700817 City/Municipality 12-025708124-4 12. PHILHEALTH NO. ZIP CODE 6521 13 SSS NO NONE 19 TELEPHONE NO NONE 14. TIN NO. 719-949-415 0917-129-8514 20. MOBILE NO. NONE johnmart.diao@vsu.edu.ph 15. AGENCY EMPLOYEE NO. 21. E-MAIL ADDRESS (if any) II. FAMILY BACKGROUND 22. SPOUSE'S SURNAME NONE 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) NONE FIRST NAME NONE NONE MIDDLE NAME NONE OCCUPATION NONE EMPLOYER/BUSINESS NAME NONE BUSINESS ADDRESS NONE TELEPHONE NO. NONE 24. FATHER'S SURNAME NONE NAME EXTENSION (JR., SR) FIRST NAME NONE MIDDLE NAME NONE 25. MOTHER'S MAIDEN NAME ELENA A. DIAO SURNAME DIAO FIRST NAME **ELENA** ALEA MIDDLE NAME (Continue on separate sheet if necessary) **EDUCATIONAL BACKGROUND** SCHOLARSHIP. PERIOD OF ATTENDANCE HIGHEST LEVEL NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE YEAR ACADEMIC I FVFI UNITS FARNED HONORS RECEIVED (Write in full) GRADUATED (Write in full) (if not graduated) From То FRANCISCAN COLLEGE OF THE IMMACULATE ELEMENTARY BASIC EDUCATION NA 2009 NA 2004 2009 CONCEPTION SECONDARY LICEO DEL VERBO DIVINO BASIC EDUCATION 2009 2013 2013 NA

VOCATIONAL / NA NA NA NA NΔ UNIVERSITY OF SAN CARLOS BACHELOR OF PHILOSOPHY CUM LAUDE COLLEGE NA 2018 2014 2018 UNIVERSITY OF SAN CARLOS MASTER OF ARTS IN PHILOSOPHY **GRADUATE STUDIES 36 UNITS** NA NA 2018 present

**SIGNATURE** 

DATE

IV. CIVIL SI	ERVICE ELIG	BILITY							
27. CARE	ER SERVICE/ RA 1	1080 (BOARD/ BAR) UNDER	RATING	DATE OF		TION / 05 11		LICENSE (if ap	oplicable)
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE			(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFER	CONFERMENT NUMBER		Date of Validity
HONOR GRADUATE NONE			NONE	JUNE 25, 2019	·R07		NONE	NONE	
			(Con	ntinue on separate sheet	if necessary)				
	EXPERIENCE					al 18/a ala Essa			
	ate employme JSIVE DATES	nt. Start from your recen	t work) Descriptio	n of auties snould b	oe indicated in the attache	ea work Exp	SALARY/ JOB/ PAY		
	m/dd/yyyy)	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
08/08/2018	11/12/2018	Part-time Ins	tructor		eral Arts and Behavioral	120/hr.	N/A	Job Order	Y
01/10/2019	7/31/2019	Substitute Ins	structor	Department of Lib	State University - Main eral Arts and Behavioral	24000.00	12	Job Order	Υ
08/01/2019	8/15/2019	Part-time Ins	tructor		State University - Main eral Arts and Behavioral State University - Main	150/hr.	N/A	Job Order	Y
8/16/2019	7/31/21	Substitute Ins	structor	Department of Lib	eral Arts and Behavioral State University - Main	26000.00	12	Job Order	Υ
				Ociciics, visayas	otate omversity - main				
SIGNATURE			(Con	ntinue on separate sheet	if necessary)				
21(41/4	- LUKE					-			

VI. VOLUNTARY WORK OR INVOLVEMENT	IN CIVIC / NON-GOVERNMENT	/ PEOPLE / V	OLUNTARY	ORGANIZATI	ON/S		
29. NAME & ADDRESS OF ORGANIZATION (Write in full)			INCLUSIVE DATES (mm/dd/yyyy)  From To		POSITION / NATURE OF WORK		
NONE		NONE	NONE	NONE	NONE		
	(Con	tinue on separate s	sheet if necessary				
(Continue on separate sheet if necessary)  VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED  (Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)							
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)			DATES OF DANCE d/yyyy) To	NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)	
National Training-Workshop for Teachers of Philippine MartialLaw Period, 1972-1986	History: Essential Truth on the	03/06/2020	03/07/2020	16.0	Instruction	Human Rights Violations Victims' Commission and USC	
SDRC Capacity Building and Training o	n Qualitative Research	01/17/2020	1/17/2020	8.0	Research	DLSU SDRC	
2nd Teacher's Training Wrokshop for the Teaching of the Human Person		05/22/2019	05/24/2019	24.0	Instruction	DLABS-VSU	
12th DLSU Arts Congress			02/20/2019	8.0	Research	DLSU Manila	
41ST UGAT Annual Conference			11/09/2019	24.0	Research	UGAT and VSU	
1st National Philosophical C	1/22/2019	1/23/2019	16.0	Research	Societas Ethica Philosophica		
Orientation of the Newly Hired Facu	Ity and Part-timers	8/30/2018	8/31/2018	16.0	Technical	VSU HR	
Orientation Seminar on General Ed	ducation Sources	7/26/2018	7/27/2018	16.0	Instruction	VSU-DLABS and Mutya	
	(Con	l tinue on separate s	sheet if necessary)	<u> </u>			
VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)					33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
ENCODING	NONE					University of San Carlos - SOPHIA	
RESEARCH (QUALITATIVE)					PHILOSOPHICAL ASSOCIATION OF THE VISAYAS AND MINDANAO		
READING					Societas Ethica Philosophica		
WRITING							
	inue on separate sheet if necessary)						
SIGNATURE	,				ATE		

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	YES ✓ YES ✓ If YES, give details:					
35. a. Have you ever been found guilty of any administrative off	☐ 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:					
36. Have you ever been convicted of any crime or violation of a by any court or tribunal?	☐ YES ☑ NO If YES, give details:					
37. Have you ever been separated from the service in any of the retirement, dropped from the rolls, dismissal, termination, er out (abolition) in the public or private sector?	✓ YES ✓ NO If YES, give details: END OF					
38. a. Have you ever been a candidate in a national or local ele Barangay election)?	ection held within the last year (except	YES NO If YES, give details:				
	b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?					
39. Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO If YES, give details (country):					
<ul> <li>40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972),</li> <li>a. Are you a member of any indigenous group?</li> <li>b. Are you a person with disability?</li> </ul>	☐ YES					
c. Are you a solo parent?	Are you a solo parent?					
41. REFERENCES (Person not related by consanguinity or affinity to applicant	t /appointee)					
NAME	ADDRESS	TEL. NO. <b>0908 880 2990</b> /	ID picture taken within			
RYAN C. URABANO, PHD	CEBU CITY, CEBU	(032) 2300 100	the last 6 months 3.5 cm. X 4.5 cm (passport size)			
RUBY S. SUAZO, PHD	CEBU CITY, CEBU	(032) 2300 100 local 125	With full and handwritten name tag and signature over			
GUIRALDO C. FERNANDEZ, JR., PHD	BAYBAY CITY, LEYTE		printed name			
42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein.  I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.						
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						
ID/License/Passport No.: H1218001610	Signature (Sign inside the b	ox)				
Date/Place of Issuance: BAYBAY CITY / MAY 07, 2018						
SUBSCRIBED AND SWORN to before me this	SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.					
	ATTY. RYSAN C. GUINOCOR					
	h					
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