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 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 NAYRE NAME EXTENSION (JR., SR) FIRST NAME CRIS JUI IUS MIDDLE NAME RARRARONA 3. DATE OF BIRTH 07/18/1993 16. CITIZENSHIP ☑ Filipino ☐ Dual Citizenship ☐ by birth ☐ by naturalization Pls. indicate country. If holder of dual citizenship. BAYBAY, LEYTE 4. PLACE OF BIRTH please indicate the details 5. SEX ☑ Male ☐ Female Zone 5 ☑ Single ☐ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS ☐ Widowed ☐ Separated Brgy. Guadalupe ☐ Other/s: Subdivision/Village Barangay Leyte **Baybay City** 1 68 m 7. HEIGHT (m) City/Municipality 69 kg ZIP CODE 6521 8. WEIGHT (kg) Zone 5 18. PERMANENT ADDRESS B+ 9. BLOOD TYPE House/Block/Lat No Brgy. Guadalupe 10. GSIS ID NO. n/a Subdivision/Village Barangay Leyte **Baybay City** 11. PAG-IBIG ID NO. 1211-3226-2809 City/Municipality Province 6521 13-050165928-3 ZIP CODE 12. PHILHEALTH NO 13. SSS NO. 06-3534301-9 19. TELEPHONE NO. 09129507028 14 TIN NO 455-013-571 20 MOBILE NO 21. E-MAIL ADDRESS (if any) 15. AGENCY EMPLOYEE NO. cris.nayre@vsu.edu.ph **FAMILY BACKGROUND** 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) 22 SPOUSE'S SURNAME n/a NAME EXTENSION (JR., SR) FIRST NAME n/a MIDDLE NAME n/a n/a OCCUPATION EMPLOYER/BUSINESS NAME nla **BUSINESS ADDRESS** n/a nla TELEPHONE NO. 24. FATHER'S SURNAME **Nayre** Jr. Crisanto FIRST NAME MIDDLE NAME Tano 25. MOTHER'S MAIDEN NAME Barbarona SURNAME Navre Flenita FIRST NAME (Continue on separate sheet if necessary) MIDDLE NAME SCHOLARSHIP ACADEMIC PERIOD OF ATTENDANCE NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE LEVEL UNITS EARNED (Write in full) (Write in full) GRADUATED HONORS (if not graduated) RECEIVED To **ViSCA Foundation Elementary School** 2000 2002 ELEMENTARY 2006 ELEMENTARY Alpha Christian School 2002 2006 Visayas State University - Laboratory 2010 2006 SECONDARY High School 2014 COLLEGE Visayas State University Bachelor of Science In Agribusiness 2010 2014 Visayas State University Master of Science in Agribusiness 2018 9 units GRADUATE STUDIES DATE SIGNATURE 20 CS FORM 212 (Revised 2017), Page

CAREE		080 (BOARD/ BAR) UNDER	RATING	DATE OF	DI ACE OF EVALUATION	ON CONFERN	DAT	LICENSE (if a	
SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE  (If Applicable)  Career Service Professional  80.32			EXAMINATION / CONFERMENT	tional High School		NUMBER	Date of Validity		
			March 3, 2024 New Ormoc City Nat						
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	XPERIENCE	ot Start from your roce		ontinue on separate sheet	of nocessary)  se indicated in the attached	l Work Expe	rience sheet		
INCLU	SIVE DATES n/dd/yyyy) To	POSITION 1 (Write in full/Do not	TITLE	DEPARTMENT / AGI	ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if epplicable)& STEP (Formal 108-0")/ INCREMENT	STATUS OF APPOINTMENT	GOVT SERVIC (Y/ N)
6/04/2014	09/04/2014	Trust Staff Account Offi	cer	Ramon Aboitiz Foundation, Incorporated		12,000.00		Permanent	N
1/24/2014	06/03/2018	Customer Service Asso	ciate	Convergys Philippi		14,000.00		Permanent	N
8/03/2018	11/29/2018	Data Entry Encoder-JO			Visayas State University - Office of the Vice President for Academic Affairs			Job Order	Y
5/22/2019	01/05/2022	Supermarket Departme			Group, Incorporated	14,000.00		Permanent	N
2/16/2022	01/03/2023	Customer Service Spec	ialist	Channel Precision,		18,000.00		Permanent	N
1/16/2023	12/31/2023	Science Research Aide	8	Visayas State University - Office of the Vice President for Research, Extension, and Innovation Visayas State University - Office of the Vice		11,520.00		Job Order	Y
1/01/2024 present Science Research Assistant		stant	Visayas State Universident for Research	17,398.00		Job Order	Y		
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				Continue on separate shee	at if necessary)				
SIGN	ATURE	( )	2/w		DATE		or /2	1/20	

/I. VOLUNTARY WORK OR INVOLVEMEN			OLUNTARY (		-		
29. NAME & ADDRESS OF (Write in fi			INCLUSIVE DATES (mm/dd/yyyy)			POSITION / NATURE OF	WORK
		From	То				
			-				
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" A SADAWA AND DEVEL ORMENT # 00		ntinuo on soparato		0			
I. LEARNING AND DEVELOPMENT (L&I.	) INTERVENTIONS/TRAINING F						
	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		Type of LD (Managerial)	CONDUCTED/ SPONSORED BY	
(Write in f	d)	From	То	NUMBER OF HOURS	Supervisory/ Technical/etc)	(Wri	te in full)
echnology Promotion Mentorship		05/15/2023	05/19/2023	40.0	Participant	VICARP - RAISE Project	Region VIII
	nor 2022		55557555555	1955.5			- Office of the President
O 9001:2015 Awareness and Re-awareness Webi ustainable Business Solution by EPSON	DAVA IDI	8/29/2023	8/29/2023	8.0	Participant		
Change the Way you Work with Sustainable Tech	nology"	9/13/2023	9/13/2023	8.0	Participant	100.00	GREENWARE and EPSON
eminar Workshop on 5S at the Workplace		7/30/2024	7/30/2024	8.0	Participant	Office of the Vice Presid	ent for Research Extension
O 9001:2015 Awareness and Re-awareness Semi	nar 2024	09/09/2024	09/09/2024	8.0	Participant	Visayas State University	- Office of the President
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VIII. OTHER INFORMATION							
31. SPECIAL SKILLS and HOBBIES	32. NC	N-ACADEMIC DISTI	NCTIONS / RECO	GNITION			SSOCIATION/ORGANIZATION
of the control of the	(Write in full)					(Write in full)	
Computer Troubleshooting	Gamma Pi Epsilon - VSU Chapter as Gr Archon/ President (2012-2014)						
Typing Skills							
Layouting and Graphics Designing					-		
Interpersonnal Service Engagement							
Customer Service							
Team Lead							
Community Engagement				H			
	-L	ontinue on separate	shoot if nacassa	-4			
SIGNATURE	7	ontinue on separate	Street, IT Treestood		ATE	05/2	

34.	Are you related by consanguinity or affinity to pointing 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?		☐ YES ☑ NO		
	b. within the fourth degree (for Local Government Unit - Care	☐ YES ☑ NO			
			If YES, give details:		
35.	a. Have you ever been found guilty of any administrative offer	ense?	☐ 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 an	☐ YES ☑ NO			
	by any court or tribunal?	If YES, give details:			
37.	Have you ever been separated from the service in any of the		☐ YES ☑ NK		
	retirement, dropped from the rolls, dismissal, termination, er out (abolition) 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)?	☐ YES ☑ NO If YES, give details:			
	b. Have you resigned from the government service during the election to promote/actively campaign for a national or local	☐ YES ☑ NO If YES, give details:			
39.	Have you acquired the status of an immigrant or permanent	☐ YES ☑ NO			
			If YES, give details (count	ry):	
40.	7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972)				
a.	Are you a member of any indigenous group?		☐ YES ☑ If YES, please specify:	NO	
b.	Are you a person with disability?	Are you a person with disability?			
G.	Are you a solo parent?	If YES, please specify ID No:  ☐ YES ☑ NO			
	rue you a solo parent?		☐ YES ☑ If YES, please specify ID No:		
41.	REFERENCES (Person not related by consanguinity or affinity to applicant)	(appointee)			
	NAME	ADDRESS	TEL. NO.		
L	Dr. Antonio P. Abamo	Brgy. Guadalupe, Baybay City, Leyte	09209835693	50	
L	Dr. Manuel D. Gacutan	VSU, Baybay City, Leyte	09176361828	V A	
	Rudelito O. Boquel	Baybay City, Leyte	09760076342		
42.	I declare under oath that I have personally accomplished				
	complete statement pursuant to the provisions of perting			-5-	
	Philippines. I authorize the agency head/authorized reprint agree that any misrepresentation made in this doc			CRIS JULIUS B. NAYRE	
	administrative/criminal case/s against me.	anone and no accommond one occ	Se die iming of		
	Sovernment Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.)			1	
	COUNTY OF THE PROPERTY OF T	n h			
	0/License/Passport No.: +02-20-000367				
-	ate/Place of Issuance: JWJ 18, 2024   BAYBAY CITY	ox)			
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	SUBSCRIBED AND SWORN to before me this	, ament exhibit	ing his/her valid/ issued governm		
13	Doc. No. 272	Y. VIVIAN C. ENARITAIDAL	LON		
	Page No. 55	NOTARY AUDIC			
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	Series of	Person Administering Oat	0326352 1/2/25 FAYBAY		
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MCLE COMPLIANCE NO. VIII-0014132 (Revised 2017), Page 4 of 4