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.

	OFILLING OUT THE PERSONAL DATA SHOT Oxes () and use separate sheet if neces	' '			(Do not fill up. For CSC u	use only)
I. PERSONAL INFORM	ATION					
2. SURNAME	BANDALAN-SALAZAR					
FIRST NAME	MARZ PAULINE				NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	GUIO-GUIO				<u> </u>	
3. DATE OF BIRTH (mm/dd/yyyy)	1/13/1995	16. CITIZENSHIP				
4. PLACE OF BIRTH	PAGADIAN CITY	If holder of dual citize	enship,		Pls. indicate country:	
5. SEX		please indicate the c	etails.			
6 CIVIL STATUS		17. RESIDENTIAL ADDRES	ADDRES House/Block/Lot No.		SAN ROQUE ST.	
					Street	
					TINAGO	
				vision/Village OPACAN	Barangay LEYTE	
7. HEIGHT (m)	1.62			Municipality	Province	
8. WEIGHT (kg)	82	ZIP CODE	City	<i>матноран</i> цу	6522	
9. BLOOD TYPE	B+	18. PERMANENT ADDRES			SAN ROQUE ST.	
	_		House	Block/Lot No.	Street	
10. GSIS ID NO.	N/A				TINAGO	
		-		vision/Village Inopacan	Barangay LEYTE	
11. PAG-IBIG ID NO.	1221153908774			Municipality	Province	
12. PHILHEALTH NO.	120514503279	ZIP CODE	0.1,77	y	6522	
13. SSS NO.	0637309174	19. TELEPHONE NO.	N/A			
14. TIN NO.	322943211000	20. MOBILE NO.	09108780538			
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if ar		marz4pers	onal@gmail.com	
II. FAMILY BACKGRO	UND					

22. SPOUSE'S SURNAME	SALAZAR		23. NAME of CHILDREN (Write full name and list all			name and list all)	DATE OF BIRTH (mm/dd/ yyyy)	
FIRST NAME	CHE	NAME EXTENSION (JR., SR)		1	V/A		N	N/A
MIDDLE NAME	MOROT							
OCCUPATION	ENGINEER							
EMPLOYER/BUSINESS NAN	SMART COMMUNICATIONS							
BUSINESS ADDRESS	MAKATI CITY, LE	YTE						
TELEPHONE NO.	N/A							
24. ATHER'S SURNAME	BANDALAN							
FIRST NAME	RAMON	NAME EXTENSION (JR., SR) N/A						
MIDDLE NAME	BRAVO	•						
25. MOTHER'S MAIDEN NAME	OFELIA GUIOGUIO							
SURNAME	GUIOGUIO							
FIRST NAME	OFELIA							
MIDDLE NAME	PLUMA		(Continue on separate sheet if necessary)					
III. EDUCATIONAL BA	CKGROUND							
26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)			OD OF DANCE	HIGHEST LEVEL/ JNITS EARNED (if not graduated)	YEAR RADUATED	SCHOLARSHI P/ ACADEMIC HONORS
				From	То	(ii flot graduated)		RECEIVED
ELEMENTARY	CALAMBA CENTRAL SCHOOL	ELEMENTARY GRAD	DUATE	6/1/2001	4/1/2006	Graduated	2006	SALUTAT ORIAN
SECONDARY	SACRED HEART HIGH SCHOOL	HIGHSCHOOL GRAD	DUATE	6/1/2006	4/1/2011	Graduated	2011	1ST HON.
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A
COLLEGE	MINDANAO STATE UNIVERSITY-IIT	BEED SCIENCE&HEALTH	I GRADUATE	6/1/2011	4/7/2015	Graduated	2015	CUM LAUDE
GRADUATE STUDIES	SOTHERN LEYTE STATE UNIVERSITY-MAIN	MAT NATURAL SCI	ENCE	8/17/2019	PRESEN T	18 UNITS	N/A	N/A
	(Conti	inue on separate sheet if ne	ecessary)			i e		
SIGNATURE		DATE	Aug	gust 28, 202	0	CS FORM 212	(Revised 201	7), Page 1 of 4

IV.	CIVIL SERVICE ELIGIBILITY					
27.		RATING	DATE OF		LICENSE (if a	ipplicable)
	UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	NUMBER	Date of Validity
	Board Examination for Teachers	82.6	Sep. 27, 2015	Cebu City	1443343	1/13/2022
		(Continu	ie on senarate shee	t if noonconn)	•	•

V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience

28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format	STATUS OF APPOINTMENT	GOV'T SERVICE
From	То	(vinte in fam be flet abbieviate)	(Write in full/Do not abbreviate)		"00-0")/ INCREMENT		(Y/ N)
6/1/2015	4/30/2017	Teacher	International Academe of Ensciema	15000.00	N/A	Contractual	N/A
5/8/2017	12/22/2017	Cultural Exchange	Netherlands Cultural Exchange Program	380 Euros	N/A	Contractual	N/A
2/13/2018	1/10/2019	ESL Teacher	TOMAS English Training Center	16800.00	N/A	Regular	N/A
1/10/2019	5/23/2019	Part-time Instructor	Visayas State University	120/hour	N/A	Contractual	N/A
8/1/2019	5/22/2020	Part-time Instructor	Visayas State University	156/hour	N/A	Contractual	N/A

	1		

	(Continue on separate sheet if necessary)								
SIGNA	TURE			DATE	August 28, 2020		CS FORM 21	2 (Revised 2017)	, Page 2 of

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S							
29. NAME & ADDRESS OF ORGANIZATION (Write in full)		/E DATES d/yyyy)	NUMBER OF HOURS	POSITION / NATURE OF WORK			
	From	То					
World Vision -Himaya Development Program	6/27/2005	7/7/2015	10 years	Youth Volunteer			
(Continue	e on separate s	heet if necess	ary)				
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS	S/TRAINING	PROGRA	MS ATTEN	DED			
(Start from the most recent L&D/training program and include only the relevant L&D	D/training taken	for the last fiv	e (5) years for	Division Chief/E	xecutive/Managerial positions)		
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	ATTEN (mm/de	DATES OF DANCE d/yyyy)	NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)		
Indel Treeds Training	From	To	00.1		Mindon of Otata Habitanita III and latel		
Intel Teach Training	10/1/2014	12/1/2015	80 hours	Technical	Mindanao State University-IIT and Intel		

(Continue	e on separate s	heet if necess	ary)		
VIII. OTHER INFORMATION					

31.	SPECIAL SKILLS and HOBBIES	139	2. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)				
	Program Hosting	N/A	\			N/A	
Micro	osoft Office Productivity Tools	N/A	\			N/A	
	(Continue on separate sheet if necessary)						
	SIGNATURE		DATE	ATE August 28, 2020 CS FORM 21		CS FORM 212 (Revised 2017), Page 3 of	

34.	Are you related by consanguinity or affinity to the appointing or recommending chief of bureau or office or to the person who has immediate supervision over Bureau or Department where you will be apppointed, a. within the third degree?	
	b. within the fourth degree (for Local Government Unit - Career Employees)?	If YES, give details:
35.	a. Have you ever been found guilty of any administrative offense?	If YES, give details:
	b. Have you been criminally charged before any court?	If YES, give details: Date Filed: Status of Case/s:
36.	Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	If YES, give details:
37.	Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?	If YES, give details: Resignation Only
38.	a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?	YES, give details:
	local candidate?	YES, give details:
39.	Have you acquired the status of an immigrant or permanent resident of another country?	If YES, give details (country): One Year Residency in Netherlands

40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8072), places answer the following items: Are you a member of any indigenous group?			If VES, plages	If YES, please specify:			
1	Are you a person with disability?		ii fES, piease	If YES, please specify:			
<i>'</i>	The you a person with disability:		If YES, please specify ID No:				
c A	Are you a solo parent?						
				e specify ID No:			
41. F	REFERENCES (Person not related by consanguinity or affir	nity to applicant /appointee)					
	NAME	ADDRESS	TEL. NO.				
	BAYRON S. BARREDO	Visca, Baybay Leyte					
ARLEE JEN AVELLANA ARLENE ALCOPRA		Mahaplag Leyte	9654882261				
		Iligan City	9506248238				
42. 	declare under oath that I have personally acco	mpionou tilio i Groonal Bata o	ricet William to a t	РНОТО			
Lice	vernment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's pse, etc.) PLEASE INDICATE ID Number Vernment Issued II 322-943-211-000 11/24/2016						
ID/l	License/Passport N 1443343	Signature (Sign inside t	he box)				
Dat	re/Place of Issuanc 3/18/2016 Cebu City	August 28, 202 Date Accomplishe		Right Thumbmark			
<u> </u>	RIBED AND SWORN to before me this	Date Accomplishe		y issued ç			

		•	•
Person Administering Oath			
(S FORM 212	(Revised 2017), F	Page 4 of 4