

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)

I. PERSONAL INFORMATION

2. SURNAME	COMPENDIO		
FIRST NAME	CRISYL	NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME	SAGA		
3. DATE OF BIRTH (mm/dd/yyyy)	04/24/1992	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	PASAY CITY, METRO MANILA	If holder of dual citizenship, please indicate the details.	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	
7. HEIGHT (m)	1.49	ZIP CODE	House/Block/Lot No. Street GACAT
8. WEIGHT (kg)	47		Subdivision/Village Barangay BAYBAY LEYTE
9. BLOOD TYPE	A+		City/Municipality Province
10. GSIS ID NO.	CRN-021-1746-9830-5		6521
11. PAG-IBIG ID NO.	1211-9553-1212		
12. PHILHEALTH NO.	13-025153490-0	18. PERMANENT ADDRESS	
13. SSS NO.	N/A	ZIP CODE	House/Block/Lot No. Street GACAT
14. TIN NO.	441-752-442		Subdivision/Village Barangay BAYBAY LEYTE
15. AGENCY EMPLOYEE NO.	V-00970		City/Municipality Province
			6521
19. TELEPHONE NO.	N/A	20. MOBILE NO.	(+63) 905 424 1793/ (+63) 910 517 3017
21. E-MAIL ADDRESS (if any)	compendiocrisyl@gmail.com / crisyl.compendio@vsu.edu.ph		

II. FAMILY BACKGROUND



22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR., SR)	N/A	
MIDDLE NAME				
OCCUPATION				
EMPLOYER/BUSINESS NAME				
BUSINESS ADDRESS				
TELEPHONE NO.				
24. FATHER'S SURNAME	COMPENDIO			
FIRST NAME	LYNDON	NAME EXTENSION (JR., SR) JR.		
MIDDLE NAME	ORTEGA			
25. MOTHER'S MAIDEN NAME				
SURNAME	SAGA			
FIRST NAME	PAULA			
MIDDLE NAME	QUISEL		(Continue on separate sheet if necessary)	

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	BAYBAY I CENTRAL SCHOOL	N/A	1998	2004	N/A	2004	N/A
SECONDARY	BAYBAY NATIONAL HIGH SCHOOL	N/A	2004	2008	N/A	2008	N/A
VOCATIONAL / TRADE COURSE	STI	MICROSOFT TRAINING PROGRAM	Jan-01- 2010	Mar-01- 2010	N/A	MARCH 2010	N/A
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF ELEMENTARY EDUCATION (BEEd)	2008	2012	N/A	2012	N/A
GRADUATE STUDIES	LEYTE NORMAL UNIVERSITY	MASTER OF ARTS IN PRE-ELEMENTARY EDUCATION	2014	PRESENT	30 UNITS	N/A	N/A

(Continue on separate sheet if necessary)

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S					
29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		
	N/A				
(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)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)
		From	To		
	I CAN DO IT: THROUGH ACTION RESEARCH	03/31/2021	03/31/2021	8.0	
	EDUTECH PHILIPPINES VIRTUAL MEET	03/24/2021	03/25/2021	15.0	
	WEBINAR ON USING DISCORD AS A CLASS COMMUNICATION TOOL	10/12/2020	10/12/2020	3.0	
	49TH NATIONAL AND 10TH INTERNATIONAL PAFTE CONVENTION 2ND WEBINAR with the theme: "THE PROMISE OF SOCIAL-EMOTIONAL LEARNING AMIDST COVID PANDEMIC"	10/9/2020	10/10/2020	8.0	
	GROWTH MINDSET AND DR. WILLIAM GLASSER'S CHOICE THEORY AND REALITY THERAPY IN ONLINE TEACHING	07/25/2020	07/25/2020	5.0	
	ONLINE TRAINING ON DEVELOPING A MOODLE ONLINE CLASSROOM	07/15/2020	07/17/2020	24.0	
	CREO MASTERCLASS ON CREATING SAFE SPACES	06/27/2020	06/27/2020	3.0	
	ONLINE JOINT WEBINAR ABOUT ENHANCING RESILIENCE IN THE WORKPLACE	6 09 2020	6 09 2020	8.0	
	DIVISIONAL TRAINING OF THE UNTRAINED SENIOR HIGH SCHOOL TEACHERS RELATIVE TO THE K TO 12 BASIC EDUCATIION CURRICULUM	11/4/2019	11/8/2019	40.0	
	CHILDLIKE WONDER EDUCATION CONFERENCE WITH THE THEME "RESILIENCE, INCLUSION & PEACE EDUCATION IN EARLY CHILDHOOD"	09/14/2019	09/15/2019	16.0	
	ANNUAL REGIONAL TEACHING CONGRESS WITH THE THEME "TEACHERS: CHALLENGED, TRANSFORMED, EMPOWERED"	02/23/2019	02/23/2019	8.0	
	SEMINAR-WORKSHOP ON PREPARING LOGFRAME FOR EFFECTIVE RESEARCH PROPOSAL	13 10 2018	13 10 2018	8.0	
	RADIO FOR DEVELOPMENT WORKSHOP	6 08 2018	6 08 2018	8.0	
	WRITESHOP ON OUTCOME-BASED EDUCATION COURSE SYLLABI	26 07 2018	26 07 2018	8.0	
	TRAINING WORKSHOP ON INNOVATIVE LEARNING STRATEGIES	15 05 2018	16 05 2018	16.0	
	ECHO SEMINAR-WORKSHOP ON 1ST ASSOCIATION OF EDUCATION RESEARCHERS AND TRAINERS (ASSERT) NATIONAL CONVENTION ON OUTCOME-BASED EDUCATION	7 04 2018	7 04 2018	8.0	
	ORIENTATION AMONG FACULTY MEMBERS ON ACADEMIC FREEDOM AND PUBLIC ACCOUNTABILITY	17 09 2017	17 09 2017	8.0	
	ANNUAL REGIONAL CONVENTION	29 07 2017	29 07 2017	8.0	
	LICENSURE EXAMINATION FOR TEACHERS (LET) REVIEW	5 07 2017	5 07 2017	8.0	
	PRACTICUM CERTIFICATE COURSE IN TEACHING ENGLISH TO YOUNG LEARNERS (ESL/EFL)	9 12 2016	10 12 2016	20.0	
	LICENSURE EXAMINATION FOR TEACHERS (LET) REVIEW	18 07 2016	19 07 2016	11.5	
	PREPARATION OF INSTRUCTIONAL MATERIALS AND COMPUTER AIDED INSTRUCTION	27 11 2015	27 11 2015	8.0	
(Continue on separate sheet if necessary)					
VIII. OTHER INFORMATION					
31.	SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
	COMPUTER SKILLS	N/A		VSU FACULTY ASSOCIATION (VSUFA)	
	ART SKILLS			PHILIPPINE ASSOCIATIONS OF GRADUATE EDUCATION (PAGE) REGION VIII	
	SINGING & DANCING			PHILIPPINE ASSOCIATION FOR TEACHERS AND EDUCATORS, INC. (PAFTE)	
	EFFECTIVE COMMUNICATION SKILLS				
	TEACHING SKILLS				
(Continue on separate sheet if necessary)					
SIGNATURE		Compendio		DATE	July 16, 2021
CS FORM 212 (Revised 2017), Page 3 of 4					

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? 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?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details: _____</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, give details (country): _____</div>												
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 8972), please answer the following items: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?		<div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div> <div><input type="checkbox"/> YES<input checked="" type="checkbox"/> NO</div> <div>If YES, please specify ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)														
<table><tr><td>NAME</td><td>ADDRESS</td><td>TEL. NO.</td></tr><tr><td>DR. LIJUERAJ J. CUADRA</td><td>VISCA, BAYBAY CITY, LEYTE</td><td>563-7527</td></tr><tr><td>MA. RACHEL KIM L. AURE</td><td>VISCA, BAYBAY CITY, LEYTE</td><td>563-7527</td></tr><tr><td>PROF. MARCO A. BRAZIL</td><td>TSUBAKA CITY, JAPAN</td><td>029-828-4321</td></tr></table>			NAME	ADDRESS	TEL. NO.	DR. LIJUERAJ J. CUADRA	VISCA, BAYBAY CITY, LEYTE	563-7527	MA. RACHEL KIM L. AURE	VISCA, BAYBAY CITY, LEYTE	563-7527	PROF. MARCO A. BRAZIL	TSUBAKA CITY, JAPAN	029-828-4321
NAME	ADDRESS	TEL. NO.												
DR. LIJUERAJ J. CUADRA	VISCA, BAYBAY CITY, LEYTE	563-7527												
MA. RACHEL KIM L. AURE	VISCA, BAYBAY CITY, LEYTE	563-7527												
PROF. MARCO A. BRAZIL	TSUBAKA CITY, JAPAN	029-828-4321												
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.		<div><div>Compendio CRISYL S. COMPENDIO</div></div>												
<div>Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance</div> <div>Government Issued ID: PRC ID</div> <div>ID/License/Passport No.: 1166801</div> <div>Date/Place of Issuance: TACLOBAN CITY</div>	<div></div> <div>Signature (Sign inside the box)</div> <div>July 16, 2021</div> <div>Date Accomplished</div>	<div></div> <div>Right Thumbmark</div>												
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.														
<div></div> <div>Person Administering Oath</div>														

CS FORM 212 (Revised 2017), Page 4 of 4