CS Form No. 212 Revised 2017

## **PERSONAL DATA SHEET**

WARNING: Any misrepresentation made in the Personal Data Sneet and the Work Experience Sneet shall cause the filling 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.										
READ THE ATTACHED GUIDE TO Print legibly. Tick appropriate boxes (			, ,		ı	DS FORM.		(Do not fill up	o. For CSC use only)	
I. PERSONAL INFORMATION		,						(	,,,	
2. SURNAME	JACOBE									
FIRST NAME	I ID									
	LUCIANO									
MIDDLE NAME	RODRIGUEZ									
3. DATE OF BIRTH (mm/dd/yyyy)	01/02/1978		16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenship						
	BRGY. ANAKAN, G	INGOOG CITY		☑ by birth ☐ by naturalization				n		
4. PLACE OF BIRTH	MISAMIS OR		If holder of dual citizenship	p, Pls. indicate country:						
5. SEX	☑ Male □	Female	please indicate the details.	S. Philippines						
6 CIVIL STATUS		✓ Married  Separated	17. RESIDENTIAL ADDRESS	Zone 6  House/Block/Lot No.						
	Other/s:	_ Separated						UADALUPE		
7 UEIOUT ()	4.00			S	ubdivision/Vil BAYBAY	lage	<u>B</u>	<i>ARANGAY</i> LEYTE		
7. HEIGHT (m)	1.80				Citv/Municipa	litv		Province		
8. WEIGHT (kg)	75		ZIP CODE				6521			
9. BLOOD TYPE	'0"		18. PERMANENT ADDRESS	Но	ouse/Block/Lo	t No.		ZONE 6 Street		
10. GSIS ID NO.	NONE	E		GUADALUPE						
11. PAG-IBIG ID NO.	1212-974-	-3827					LEYTE	<i>RANGAY</i> LEYTE		
			710 0005	City/Municipality			Province			
12. PHILHEALTH NO.  13. SSS NO.	13-025228 NONE		ZIP CODE 19. TELEPHONE NO.	(052) 562 9627						
14. TIN NO.	607-840-		20. MOBILE NO.	(053)-563-8627 09533502893						
15. AGENCY EMPLOYEE NO.	NONE		21. E-MAIL ADDRESS (if any)	junjacobe02@gmail.com						
II. FAMILY BACKGROUND			, ,,							
22. SPOUSE'S SURNAME		JACOB	E	23. NA	ME of CHILD	REN (Write	full name and list all)	DATE OF BIF	RTH (mm/dd/yyyy)	
22. SPOUSE'S SURNAME  FIRST NAME	JOVEL'	1	E	23. NA		REN (Write YVONNE G.			RTH (mm/dd/yyyy) 04/2011	
	JOVEL <sup>1</sup>	1		23. NA		-				
FIRST NAME		YN	00	23. NA		-				
FIRST NAME MIDDLE NAME		YN GOFREI	00	23. NA		-				
FIRST NAME MIDDLE NAME OCCUPATION	SC	YN  GOFREI EIENCE RESEARC VSU	00	23. NA		-				
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME	SC	YN  GOFREI EIENCE RESEARC VSU	DO H ASSISTANT BAYBAY CITY, LEYTE	23. NA		-				
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS	SC	YN  GOFREL  IENCE RESEARC  VSU  Y PANGASUGAN,	BAYBAY CITY, LEYTE	23. NA		-				
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.	SC	YN  GOFREI IENCE RESEARC  VSU Y PANGASUGAN, 95335028  JACOB	BAYBAY CITY, LEYTE	23. NA		-				
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME	SC BARANGAY	YN  GOFREI IENCE RESEARC  VSU Y PANGASUGAN, 95335028  JACOB	BAYBAY CITY, LEYTE 393 E SR.	23. NA		-				
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.  24. FATHER'S SURNAME FIRST NAME	SC BARANGAY	YN  GOFREI IENCE RESEARC  VSU Y PANGASUGAN, 95335028  JACOB	BAYBAY CITY, LEYTE 393 E SR.	23. NA		-				
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME	SC BARANGAY	YN  GOFREE IENCE RESEARC  VSU Y PANGASUGAN, 95335026  JACOB NO TULAYTA	BAYBAY CITY, LEYTE 393 E SR. AY	23. NA		-				
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.  24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME	SC BARANGAY	YN  GOFREI IENCE RESEARC  VSU Y PANGASUGAN, 95335028  JACOB NO  TULAYTA RODRIGL	BAYBAY CITY, LEYTE 393 E SR. AY	23. NA		-				
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO. 24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME	SC BARANGAY	YN  GOFREE IENCE RESEARC  VSU Y PANGASUGAN, 95335026  JACOB  NO  TULAYTA  RODRIGL  JACOB	BAYBAY CITY, LEYTE 393 E SR. AY JEZ E	23. NA	BRETT	YVONNE G.		06/0		
FIRST NAME MIDDLE NAME OCCUPATION  EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.  24. FATHER'S SURNAME FIRST NAME MIDDLE NAME  25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME	SC BARANGAY	YN  GOFREI IENCE RESEARC  VSU Y PANGASUGAN, 95335028  JACOB NO  TULAYT, RODRIGL JACOB SARAH	BAYBAY CITY, LEYTE 393 E SR. AY JEZ E	23. NA	BRETT	YVONNE G.	JACOBE	06/0		
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.  24. FATHER'S SURNAME FIRST NAME MIDDLE NAME  SURNAME FIRST NAME MIDDLE NAME FIRST NAME MIDDLE NAME	SC BARANGAY	YN  GOFREI IENCE RESEARC VSU Y PANGASUGAN, 95335028 JACOB NO TULAYTA RODRIGL JACOB SARAH TUTO	BAYBAY CITY, LEYTE 393 E SR. AY JEZ E		PERIO ATTENE	(Continue of DANCE	JACOBE	06/0		
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.  24. FATHER'S SURNAME FIRST NAME MIDDLE NAME 25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME MIDDLE NAME MIDDLE NAME	BARANGAY  LUCIAN  NAME OF S	YN  GOFREE IENCE RESEARC VSU Y PANGASUGAN, 95335028 JACOB NO TULAYT, RODRIGL JACOB SARAH TUTO CHOOL full)	BAYBAY CITY, LEYTE  BAYBAY CITY, LEYTE  BY  BY  BAYBAY CITY, LEYTE  BY  BY  BAYBAY CITY, LEYTE  BAYBAY  BAYBAY CITY, LEYTE  BAYBAY CITY, LEYTE  BAYBAY  BAYBAY CITY, LEYTE  BAYBAY CITY, LEYTE  BAYBAY  BAYBAY		PERIC	(Continue of	DON separate sheet if no	ecessary)  YEAR GRADUAT	04/2011 SCHOLARSHIP/ ACADEMIC HONORS	
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.  24. FATHER'S SURNAME FIRST NAME MIDDLE NAME  25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME MIDDLE NAME  MIDDLE NAME LEVEL	BARANGAY  LUCIAN  NAME OF S (Write in	YN  GOFREI IENCE RESEARC VSU Y PANGASUGAN, 95335028 JACOB NO TULAYTA RODRIGL JACOB SARAH TUTO CHOOL full)	BAYBAY CITY, LEYTE  BAYBAY CITY, LEYTE  BY  BY  BAYBAY CITY, LEYTE  BY  BY  BAY  BAY  BAY  BAY  BAY  BASIC EDUCATION/DEGREE/CO  (Write in full)		PERIC ATTENE	(Continue of DANCE	DIN SEPARATE Sheet if INC.  HIGHEST LEVEL/ UNITS EARNED (if not graduated)	ecessary)  YEAR GRADUAT ED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.  24. FATHER'S SURNAME FIRST NAME MIDDLE NAME  25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME  III. EDUCATIONAL BACKGROUND  26. LEVEL ELEMENTARY	BARANGAY  LUCIAN  NAME OF S (Write in	YN  GOFREE IENCE RESEARC VSU Y PANGASUGAN, 95335028 JACOB NO TULAYT, RODRIGL JACOB SARAH TUTO CHOOL full) TARY SCHOOL HIGH SCHOOL	BAYBAY CITY, LEYTE  BAYBAY CITY, LEYTE  BY  BY  BAYBAY CITY, LEYTE  BY  BY  BAY  BY  BAY  BAY  BAY  BASIC EDUCATION/DEGREE/CO  (Write in full)  Primary Education		PERIC ATTENE From 1986	(Continue of DANCE To 1992	DIN SEPARATE Sheet if Inc.  HIGHEST LEVEL/ UNITS EARNED (if not graduated)  Certificate	ecessary)  YEAR GRADUAT ED  1992	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED	
FIRST NAME MIDDLE NAME OCCUPATION  EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.  24. FATHER'S SURNAME FIRST NAME MIDDLE NAME  25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME  III. EDUCATIONAL BACKGROUND  26. LEVEL  ELEMENTARY SECONDARY VOCATIONAL /	NAME OF S (Write in ANAKAN ELEMENT	YN  GOFREE IENCE RESEARC VSU Y PANGASUGAN, 95335028 JACOB NO TULAYT, RODRIGL JACOB SARAH TUTO CHOOL full) FARY SCHOOL HIGH SCHOOL	BAYBAY CITY, LEYTE 393 E SR. AY JEZ E H BASIC EDUCATION/DEGREE/CO (Write in full) Primary Education High School	DURSE	PERIO ATTENE From 1986 1992	(Continue of DOF DANCE To 1992 1996	DIPLOMA  DIP	OG/O  PECESSARY)  YEAR GRADUAT ED  1992  1996	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED N/A	
FIRST NAME MIDDLE NAME OCCUPATION EMPLOYER/BUSINESS NAME BUSINESS ADDRESS TELEPHONE NO.  24. FATHER'S SURNAME FIRST NAME MIDDLE NAME  25. MOTHER'S MAIDEN NAME SURNAME FIRST NAME MIDDLE NAME  III. EDUCATIONAL BACKGROUND  26. LEVEL  ELEMENTARY SECONDARY  VOCATIONAL / TRADE COURSE	NAME OF S (Write in  ANAKAN ELEMENT  MALIBUD NATINAL  N/A  UNIVERSITY OF	YN  GOFREE IENCE RESEARC VSU Y PANGASUGAN, 95335028 JACOB NO TULAYT, RODRIGL JACOB SARAH TUTO CHOOL full) FARY SCHOOL HIGH SCHOOL	BAYBAY CITY, LEYTE 393  E SR. AY JEZ  E H  BASIC EDUCATION/DEGREE/CO (Write in full)  Primary Education  High School  N/A  BACHELOR OF SCIENCE CRIMINOLOGY	DURSE	PERIO ATTENE From 1986 1992 N/A	(Continue of DOF) DANCE To 1992 1996 N/A	DIPLOMA  AND A SEPARATE Sheet if not graduated)  Certificate  Diploma  N/A	ecessary)  YEAR GRADUAT ED 1992 1996 N/A	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED N/A N/A	

IV. CIVIL	SERVICE	ELIGIBILITY							
27. CAREER SERVICE/ RA 1080 (BOARD/ BAR)			DATE OF			LICENSE (if applicable)			
LINDED ODECIAL LAMO/ CEG/ COEE A RATING			(If Applicable)	EXAMINATION / CONFERMENT	TION / CONFER	RMENT	NUMBER	Date of Validity	
BAR	ANGAY OFFI	CIAL ELIGIBILITY		25/07/2014				220110140254	
				(Continue on separate sl	neet if necessary)				
V. WORK	( EXPERIE	NCE		Continue on Separate Si	icet ii riceessary)				
		yment. Start from you	ır recent work)	Description of dutie	s should be indicated i	n the attache	ed Work Ex	perience sheet.	
	JSIVE DATES m/dd/yyyy)		POSITION TITLE		DEPARTMENT / AGENCY / OFFICE / COMPANY		SALARY/ JOB/ PAY GRADE (if applicable)&	STATUS OF	GOV'T SERVICE
From	То	(Write in full/Do not abbreviate)		(Write in full/l	Do not abbreviate)	SALARY	STEP (Format *00-0")/ INCREMENT	APPOINTMENT	(Y/N)
01/09/2023	Present	Utility		VSU	Hospital	506/day		Job Order	Yes
01/11/2021	31/08/2023	Watchma	an	VSU	Hospital	506/day		Job Order	Yes
01/10/2020	31/12/2020	Emergency	Labor	NAF	RC-VSU	500/day		Job Order	Yes
01/05/2007	31/05/2010	Brgy. Cour	cilor	Brgy. Tagpako, Gir	ngoog City, Misamis Or.	10,000/mo.		Elected	Yes
01/03/2005	31/12/2006	Laboratory	Aide	Secura Plant Gene	etics Corp. Misamis Or.	8,000/mo.		Job Order	No
SIGNA	ATURE	- 0		(Continue on separate si	neet if necessary) DATE		June	e 17, 2025	017) Page 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S						
29. NAME & ADDRESS OF ORGANIZATION		INCLUSIVE DATES (mm/dd/yyyy)		DOSITION / NATURE OF WORK		
(Write in full)	From	То	NUMBER OF HOURS	POSITION / NATURE OF WORK		
NONE						
AUL LEADAUNG AND DEVELOPMENT (LOD) INTERVENTON		separate sheet if no				
VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTION (Start from the most recent L&D/training program and include only the relevant L&D				Chief/Executive/Man	agerial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING	INCLUSIVE DATES OF ATTENDANCE		NUMBER OF HOURS	Type of LD ( Managerial/ Supervisory/	CONDUCTED COONCODED BY	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	(mm/dd/yyyy)				CONDUCTED/ SPONSORED BY (Write in full)	
	From	То		Technical/etc)		
Hands-Only Cardiopulmonary Resuscitation	7/21/2022	7/23/2022	16.0	Technical	Visayas State University, Visca, Baybay Leyte	
Landscape Training	6/14/2023	6/14/20203	8.0	Technical	2nd Floor, CCE Building VSU, Baybay City, Leyte	
Basic Life Support Provider's Course - Healthcare Provider	7/12/2023	7/13/2023	16.0	Technical	Pavillion Glass Room, VSU, Baybay City, Leyte	
Standard First Aid Training - Healthcare Provider	7/13/2023	7/14/2023	16.0	Technical	Pavillion Glass Room, VSU, Baybay City, Leyte	
ISO 9001:2015 Awareness & Re-awareness Webinar	8/29/2023	8/29/2023	8.0	Technical	Visayas State University, Visca, Baybay Leyte	
Orientation on Customer Service and Work Values in the Workplace	9/12/2023	9/13/2023	16.0	Technical	Visayas State University, Visca, Baybay Leyte	
"Reclaiming Personal effectiveness: A Journal to Self-Empowerment"	5/28/2024	5/30/2024	24.0	Technical	VSU Beach Garden, Visayas State University, Baybay City Leyte	
	(Continue on a	separate sheet if no	ocessary)			
VIII. OTHER INFORMATION	(Johanac on S	-parato onoten ne	, , , , , , , , , , , , , , , , , , ,			
	ION ACADEMIC 5:3	TIMOTIONS (DES	OCNITION		MEMBERGUID IN ACCOUNTION OF A STATE OF	
31. SPECIAL SKILLS and HOBBIES 32.	ION-ACADEMIC DIS (V	Vrite in full)	OGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)	
Driving	N	ONE			None	
Computer Literate						
	(Continue on s	separate sheet if no				
SIGNATURE				DATE	June 17, 2025	
					CS FORM 212 (Revised 2017), Page 3 of 4	

34.	Are you related by consanguinity or affinity to the appropriate of bureau or office or to the person who has im Bureau or Department where you will be approinted a. within the third degree?  b. within the fourth degree (for Local Government Ur	mediate supervision over you in ,	YES ☑ NO ☐ YES ☑ NO ☐ YES ☑ NO ☐ If YES, give details:				
35.	a. Have you ever been found guilty of any administra	itive offense?	☐ YES ☑ NO If YES, give details:				
	b. Have you been criminally charged before any cou	rt?	☐ YES ☑ NO  If YES, give details:  Date Filed:  Status of Case/s:				
36.	Have you ever been convicted of any crime or violation or or or tribunal?	on of any law, decree,	☐ YES ☑ NO  If YES, give details:				
37.	Have you ever been separated from the service in a resignation, retirement, dropped from the rolls, dismi finished contract or phased out (abolition) in the public	ssal, termination, end of term,	☐ YES ☑ NO If YES, give details:				
38.	a. Have you ever been a candidate in a national or lo year (except Barangay election)?	ocal election held within the last	☐ YES	✓ NO			
	b. Have you resigned from the government service of before the last election to promote/actively campaign candidate?		If YES, give details:  ☐ YES ☐ NO  If YES, give details:				
39.	Have you acquired the status of an immigrant or country?	permanent resident of another	YES NO If YES, give details (country):				
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); Persons (RA 7277); and (c) Solo Parents Welfare Ac answer the following items:						
a.	Are you a member of any indigenous group?		☐ YES If YES, please specify:	☑ NO			
b.	Are you a person with disability?		☐ YES	✓ NO			
C.	Are you a solo parent?		If YES, please specify ID No:  ☐ YES  If YES, please specify ID No:	▼ NO			
41.	REFERENCES (Person not related by consanguinity or affinity to a	applicant /appointee)					
	NAME	ADDRESS	TEL. NO.				
	ELWIN JAY YU	VSU, HOSPITAL					
	LUZ O. MORENO	NARC, VSU	9164239381				
	ALLEN LAMBERT	DBM, VSU		-			
42.	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.						
Date/Place of Issuance: RAYBAY CITY LEYTE June 1			n inside the box) 7, 2025 complished	Right Thumbmark			
	SUBSCRIBED AND SWORN to before me this		, affiant exhibiting his/her validly iss	ued government ID as indicated above.			
	1						
		Person Admini	istering Oath				