

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 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	VILLAS			
FIRST NAME	NORBERT	JOHN	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ORTEGA			
3. DATE OF BIRTH (mm/dd/yyyy)	04/02/1994	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: Philippines	
4. PLACE OF BIRTH	BAYBAY CITY	If holder of dual citizenship, please indicate the details.		
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female			
6 CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	APARTMENT 49A KILBOURNE House/Block/Lot No. Street VSU PANGASUGAN Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province 6521-A	
7. HEIGHT (m)	1.7	18. PERMANENT ADDRESS	APARTMENT 49A KILBOURNE House/Block/Lot No. Street VSU PANGASUGAN Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province	
8. WEIGHT (kg)	72		ZIP CODE	
9. BLOOD TYPE	B+		ZIP CODE	
10. GSIS ID NO.	NONE			
11. PAG-IBIG ID NO.	1211-2893-4111			
12. PHILHEALTH NO.	13-025251633-7			
13. SSS NO.	06-353-4302-2	19. TELEPHONE NO.	(053)563-7114	
14. TIN NO.	457-121-653-0000	20. MOBILE NO.	+639206680310	
15. AGENCY EMPLOYEE NO.	NONE	21. E-MAIL ADDRESS (if any)	villasnorbert@gmail.com	

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	VILLAS	23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	JANSEL JOI	NORWAYNE JAN C. VILLAS	09/20/2017
MIDDLE NAME	CABATAÑA		
OCCUPATION	ADMINISTRATIVE STAFF		
EMPLOYER/BUSINESS NAME	VISAYAS STATE UNIVERSITY		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	NONE		
24. FATHER'S SURNAME	VILLAS		
FIRST NAME	NORBERTO		
MIDDLE NAME	CABANTUG		
25. MOTHER'S MAIDEN NAME			
SURNAME	ORTEGA		
FIRST NAME	NORMA		
MIDDLE NAME	DANCIL		
(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	VISCA FOUNDATION ELEMENTARY SCHOOL	ELEMENTARY	05/06/2000	24/03/2006		2006	
SECONDARY	VISAYAS STATE UNIVERSITY LABORATORY HIGH SCHOOL	HIGH SCHOOL	05/06/2006	19/03/2010		2010	
VOCATIONAL / TRADE COURSE	NONE						
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRIBUSINESS	07/06/2010	09/05/2014		2014	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER IN MANAGEMENT MAJOR IN BUSINESS MANAGEMENT	27/06/2015	on-going	40 units		
(Continue on separate sheet if necessary)							
SIGNATURE			DATE		1/26/2021		

#### IV. CIVIL SERVICE ELIGIBILITY

[illegible]

**(Continue on separate sheet if necessary)**

## V. WORK EXPERIENCE

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

[illegible]

**(Continue on separate sheet if necessary)**

<b>SIGNATURE</b>		<b>DATE</b>	1/26/2021
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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		
NONE					

(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)		Hours	Type of LD ( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	PHILIPPINE INSTITUTE DEVELOPMENT STUDIES IMPACT EVALUATION	9/6/2017	9/7/2017	16	Technical	Philippine Institute Development Studies
	Field Operations Manual Training for Monitoring Project Development Officer	7/3/2017	07/07/2017	40	Technical	Department of Social Welfare and Development
	Sustainable Livelihood Program PRE-EMPLOYMENT ORIENTATION TRAINING FOR NEWLY-HIRED STAFF	23/05/2017	26/05/2017	32	Technical	Department of Social Welfare and Development
	MARKETING MANAGEMENT SEMINAR	19/05/2017	19/05/2017	8	Technical	Visayas State University
	AGRIBUSINESS APPRENTICESHIP ORIENTATION/SEMINAR	13/12/2016	13/12/2016	8	Technical	Visayas State University
	HIV in the Workplace Seminar	09/12/2016	09/12/2016	8	Technical	Visayas State University
	Gender Awareness and Development Seminar	15/08/2016	15/08/2016	8	Technical	Visayas State University
	VSU-Agriculture and Food Technology Business Incubator Bootcamp	16/07/2019	20/07/2019	32	Technical	Visayas State University
	Rural Impact Sourcing Technical Training/Digital Jobs PH	03/09/2019	05/11/2019	96	Technical	Department of Information and Communications Technology




(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)
	Driving Skills		NONE		NONE
	Computer Skills				
	Analytical Skills				

(Continue on separate sheet if necessary)

SIGNATURE		DATE	1/26/2021
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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 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 checked="" type="checkbox"/> YES<input type="checkbox"/> NO</div> <div>If YES, give details: Looking for greener pasture</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>ERNESTO F. BULAYOG</td><td>Visayas State University</td><td>9261306524</td></tr><tr><td>RENATO A. MAALA</td><td>Visayas State University</td><td>9958500725</td></tr><tr><td>JACQUELINE M. GUARTE</td><td>Visayas State University</td><td>9164057852</td></tr></table>			NAME	ADDRESS	TEL. NO.	ERNESTO F. BULAYOG	Visayas State University	9261306524	RENATO A. MAALA	Visayas State University	9958500725	JACQUELINE M. GUARTE	Visayas State University	9164057852
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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> PHOTO</div> <div> Right Thumbmark</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: LTO Driver's License</div> <div>ID/License/Passport No.: H12-13-002396</div> <div>Date/Place of Issuance: April 8, 2016</div>	<div> Signature (Sign inside the box)</div> <div>1/26/2021</div> <div>Date Accomplished</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>														