

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		BANDALAN-SALAZAR			
FIRST NAME		MARZ PAULINE		NAME EXTENSION (JR., SR) N/A	
MIDDLE NAME		GUIO-GUIO			
3. DATE OF BIRTH (mm/dd/yyyy)	1/13/1995	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.		<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:	
4. PLACE OF BIRTH	PAGADIAN CITY				
5. SEX	<input type="checkbox"/> Male <input checked="" 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	SAN ROQUE ST. <i>House/Block/Lot No.</i> <i>Street</i> TINAGO <i>Subdivision/Village</i> <i>Barangay</i> INOPACAN LEYTE <i>City/Municipality</i> <i>Province</i> 6522		
7. HEIGHT (m)	1.62	ZIP CODE	18. PERMANENT ADDRESS		
8. WEIGHT (kg)	82		SAN ROQUE ST. <i>House/Block/Lot No.</i> <i>Street</i> TINAGO <i>Subdivision/Village</i> <i>Barangay</i> Inopacan LEYTE <i>City/Municipality</i> <i>Province</i> 6522		
9. BLOOD TYPE	B+				
10. GSIS ID NO.	N/A	ZIP CODE			
11. PAG-IBIG ID NO.	1221153908774				
12. PHILHEALTH NO.	120514503279				
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 any)	marzpauline.salazar@vsu.edu.ph		

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	SALAZAR		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	CHE	NAME EXTENSION (JR., SR) N/A	THEODEN B. SALAZAR	DEC. 23, 2020
MIDDLE NAME	MOROT			
OCCUPATION	ENGINEER			
EMPLOYER/BUSINESS NAME	SMART COMMUNICATIONS			
BUSINESS ADDRESS	MAKATI CITY, LEYTE			
TELEPHONE NO.	N/A			
24. FATHER'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 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	CALAMBA CENTRAL SCHOOL	ELEMENTARY GRADUATE	6/1/2001	4/1/2006	Graduated	2006	SALUTATORIAN
SECONDARY	SACRED HEART HIGH SCHOOL	HIGHSCHOOL GRADUATE	6/1/2006	4/1/2011	Graduated	2011	1ST HON. MENTION
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 GRADUATE	6/1/2011	4/7/2015	Graduated	2015	CUM LAUDE
GRADUATE STUDIES	SOTHERN LEYTE STATE UNIVERSITY-MAIN	MAT NATURAL SCIENCE	8/17/2019	PRESENT	27UNITS	N/A	N/A
<i>(Continue on separate sheet if necessary)</i>							
SIGNATURE		DATE	July 31, 2021		CS FORM 212 (Revised 2017), Page 1 of 4		

[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)

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[illegible]

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)

(Continue on separate sheet if necessary)

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Program Hosting	N/A	N/A
Microsoft Office Productivity Tools	N/A	N/A

<i>(Continue on separate sheet if necessary)</i>		
<i>SIGNATURE</i>		<i>DATE</i>
		<i>July 31, 2021</i>
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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)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <div style="text-align: right;">Date Filed: _____</div> <div style="text-align: right;">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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 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?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____ <div style="text-align: right;">Resignation Only</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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details (country): _____ <div style="text-align: right;">One Year Residency in Netherlands</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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____

41. REFERENCES (Person not related by consanguinity or affinity to applicant / appointee)			<div style="border: 1px solid black; padding: 10px; margin-bottom: 10px;"> ID picture taken within the last 6 months 3.5 cm. X 4.5 cm (passport size) With full and handwritten name tag and signature over printed name Computer generated or photocopied picture is not acceptable </div> <div style="border: 1px solid black; height: 100px; margin-bottom: 10px;"></div> <div>PHOTO</div>
NAME	ADDRESS	TEL. NO.	
BAYRON S. BARREDO	Visca, Baybay Leyte		
ARLEE JEN AVELLANA	Mahaplag Leyte	9654882261	
ARLENE ALCOPRA	Iligan City	9506248238	
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.			

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	<div style="border: 1px solid black; height: 60px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Signature (Sign inside the box)</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">July 31, 2021</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Date Accomplished</div>	<div style="border: 1px solid black; height: 100px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Right Thumbmark</div>
Government Issued ID: 322-943-211-000 11/24/2016		
ID/License/Passport No.: 1443343		
Date/Place of Issuance: 3/18/2016 Cebu City		

SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.

Person Administering Oath