WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

- 2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.
- Duration: September 9, 2022 to September 9, 2023
- Position: Executive Office Personnel
 Name of Office/Unit: Executive Office
- Immediate Supervisor: Ms. Janet Amurao
- Name of Agency/Organization and Location: E-Primate Incorporated of Marikina City
 - List of Accomplishments and Contributions (if any)
 - Produces Standard Operating Procedures to ensure consistency and efficiency in regular work activities
 - Produces business reports
 - Summary of Actual Duties
 - Review and record all incoming documents for completeness and accuracy prior to signing by the Executives.
 - ♦ Supervise co-employees with the status of their assignments and reports
 - Attends, record, and produces minutes of meeting
 - ♦ Updates the bulletin board by posting and removing outdated information
 - Doing field work during deployment
 - ♦ Perform other clerical tasks assigned from time to time
- Duration: December 2023 April 2024
- Position: Sangguniang Kabataan Treasurer
- Name of Office/Unit: Brgy. Rizal Local Government Unit
- Immediate Supervisor: Melchor Lopez
- Name of Agency/Organization and Location: Brgy. Rizal LGU, Rizal, Dulag, Leyte
 - Summary of Actual Duties
 - ♦ Process payroll
 - ♦ Sign all required documents and checks
 - ♦ Deposit and withdraw cash and check to/from the bank
- Duration: April 01, 2024 December 31, 2024
- Position: Administrative Support Staff

- Name of Office/Unit: Principal's Office
- Immediate Supervisor: Ferdinand B. Songalia
- Name of Agency/Organization and Location: Jose Rizal National High School (Dulag, Leyte)
 - List of Accomplishments and Contributions (if any)
- ♦ Served as Chairman on Registration and Documentation (TWG) during the School-Based Training of Teachers (SBTT) on the MATATAG Curriculum for Secondary Teachers.
 - Summary of Actual Duties
 - Provide overall administrative and technical support to the School Head and other school personnel in the daily operations of the school;
 - ♦ Assist the School Head in preparing, conducting, advocating, monitoring and evaluating programs, projects and activities; and
 - Performed other administrative and technical assistance as may be determined by the School Head.

KIMBERLY VIVERO NONAY

(Signature over Printed Name of Employee Applicant)

Date: November 26, 2024

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PERSONAL DATA SHEET

in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. 1. CS ID No. Print legibly. Tick appropriate boxes () and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. (Do not fill up. For CSC use on 2. SURNAME NONAY ME EXTENSION (JR., SF) FIRST NAME KIMBERLY MIDDLE NAME VIVERO 3. DATE OF BIRTH 08/21/1999 16. CITIZENSHIP ☑ Filipino □ Dual Citizenship (mm/dd/yyyy) ☐ by birth ☐ by naturalization Pls. indicate country: BRGY. RIZAL, DULAG, LEYTE 4 PLACE OF BIRTH If holder of dual citizenship, please indicate the details ☐ Male ☑ Female 5 SEX ☑ Single DAGIS ZONE 1 ☐ Married 17. RESIDENTIAL ADDRESS 6 CIVIL STATUS □ Widowed □ Separated House/Block/Lat No Street RIZAL Other/s: Subdivision/Village Barangay LEYTE DULAG 7. HEIGHT (m) 1.6m City/Municipality Province 53kg 8. WEIGHT (kg) ZIP CODE 6505 18 PERMANENT ADDRESS ZONE 1 DAGIS 9 BLOOD TYPE N/A House/Black1 at No Street RIZAL 10 GSIS ID NO N/A Baranga **DULAG** LEYTE 1213-0998-9682 11 PAG-IBIG ID NO. City/Municipality **Fravince** 13-250468858-9 12. PHILHEALTH NO ZIP CODE 6505 06-4497619-2 13. SSS NO. 19 TELEPHONE NO NA 635-136-788-000 14 TIN NO 20 MOBILE NO 09918853683 N/A 15 AGENCY EMPLOYEE NO. 21 E-MAIL ADDRESS (if any) kimbirlivivero@gmail.com FAMILY BACKGROUP N/A 23 NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) 22 SPOUSE'S SURNAME LAME EXTENSION (JR., SR) N/A N/A FIRST NAME N/A MIDDLE NAME N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A BUSINESS ADDRESS N/A TELEPHONE NO NONAY 24 FATHER'S SURNAME AME EXTENSION (JR., SR) BUENAVENTURA FIRST NAME MIDDLE NAME CAGARA 25 MOTHER'S MAIDEN NAME SURNAME **VIVERO MARIA TERESA** FIRST NAME NOLASCO MIDDLE NAME (Continue on separate sheet if necessary) SCHOLARSHI HIGHEST LEVEL UNITS EARNED PERIOD OF ATTENDANCE BASIC EDUCATION/DEGREE/COURSE NAME OF SCHOOL LEVEL (Write in full) (Write in full) GRADUATED HONORS RECEIVED From To WITH HONOF RIZAL ELEMENTARY SCHOOL PRIMARY EDUCATION ELEMENTARY 2006 2012 GRADUATE 2012 **RIZAL NATIONAL HIGH SCHOOL** SENIOR HIGH SCHOOL WITH HONOR SECONDARY 2018 2012 2018 GRADUATE N/A N/A N/A NA NA N/A TRADE COURSE **BACHELOR OF SCIENCE IN VISAYAS STATE UNIVERSITY** CUM LAUDE 2022 COLLEGE 2018 2022 GRADUATE **FISHERIES** N/A N/A N/A NA GRADUATE STUDIES N/A N/A N/A 11/26/2024 SIGNATURE DATE

27. CAREER SERV	VICE/ RA 1050 (BCIARDY B	AR) UNDER SPECIAL LAWS/ BARANGAY ELIGIBILITY /	RATING	DATE OF EXAMINATION /	PLACE OF EXAMINA	TION / CONFEE	MENT	LICENSE (# app	lica
CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE		(if Applicable)	CONFERMENT	Paral of Estimation Control Control			NUMBER	Date Valid	
но	HONOR GRADUATE ELIGIBILITY			09/14/2023	CSC	RO VIII		N/A	L
RA 100	RA 1080- FISHERIES PROFESSIONALS		79.5	10/25-26/2023	TACLOBAN CITY NIGHT HIGH SCHOOL				
	N/A		N/A	NA	N/A			N/A	
V. WORK EXPE		rom unur recent work! Da	SHOW	on teparate sheet if ou	d in the attached Work E	meriania st			
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DECEMBER 2023	APRIL 2024	BRGY, RIZAL - SK 1	REASURER		L, DULAG, LEYTE ANG KABATAAN	900	N/A	CONTRACTUAL	Γ
APRIL 2024	DECEMBER 2024	ADMINISTRATIVE SU	PPORT STAFF		TIONAL HIGH SCHOOL	10000	N/A	CONTRACTUAL	Υ
N/A	N/A	N/A			N/A	N/A	N/A	N/A	
(20 SIGN	ATURE		agh	ore on separate sheet if o	ecessary) DATE		11 126 121	24	

NAME & ADDRESS OF	ORGANIZATION	INCLUSA	E DATES		100	Maria Cara Cara Cara Cara Cara Cara Cara
(Write in		(mm/d	d/yyyy) To	NUMBER OF HOURS		POSITION / NATURE OF WORK
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NAME OF TAXABLE PARTY.	(Co.	ntinue on separate :	theet if nocessary			
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(Write in 1	ul)		d/yyy)	M.MIER OF HOURS	(Managerial/ Supervisory/ Technical/etc)	(Write in full)
School-Based Training of Teachers (SBTT)	on the MATATAG Curriculum for	From	To			
Secondary Teachers Dulag-Ju	lita Cluster Batch 2	08/17-18/2024	08/23-25/2024	40	Technical	Dulag National High School
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OTHER INFORMATION		No. of Lot, House, etc., in such	ENDED.			
SPECIAL SKILLS and HOBBIES	32. NO	N-ACADEMIC DISTIN	NCTIONS / RECOG	INITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZ/
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Are you related by consanguinity or affinity to the appointing	or recommending authority, or to the	The state of the s			
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 apppointed,	24/18/				
a. within the third degree?	1 1 2 2	☐ YES ☑ NO			
The state of the s	per Employees)?	☐ YES ☑ NO			
b. within the fourth degree (for Local Government Unit - Care	ser Employees) r	If YES, give details:			
		II 123, give details.			
5. a. Have you ever been found guilty of any administrative offer	ense?	☐ YES			
		If YES, give details:			
		☐ YES ☑ NO			
b. Have you been criminally charged before any court?		☐ YES ☑ NO If YES, give details:			
		Date Filed:			
		Status of Case/s:			
. Have you ever been convicted of any crime or violation of an	ny law, decree, ordinance or regulation by	YES Ø NO			
any court or tribunal?		If YES, give details:			
Have you ever been separated from the service in any of the dropped from the rolls, dismissal, termination, end of term, fi	e following modes: resignation, retirement,	✓ YES □ NO If YES, give details:			
in the public or private sector?	RESIGNATION - TAKE BOARD EXAM				
a. Have you ever been a candidate in a national or local elec-	ction held within the last year (except	□ YES ☑ NO			
Barangay election)?		If YES, give details:			
	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?				
Have you acquired the status of an immigrant or permanent	resident of another country?	☐ YES ☑ NO			
	-	If YES, give details (country):			
The state of the s					
Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Mag	gna Carta for Disabled Persons (RA				
7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972).	please answer the following items:	750 YANG 1			
Are you a member of any indigenous group?		☐ YES ☑ NO			
10 H 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		If YES, please specify:			
Are you a person with disability?		☐ YES ☑ NO If YES, please specify ID No:			
		and the same of th			
Are you a solo parent?		If YES, please specify ID No:			
REFERENCES (Person not related by consanguinity or affinity to applicant	t /appointee)				
NAME	ADDRESS	TEL NO.			
MARY ANN MADEJA	BATUG, DULAG, LEYTE	9283196688			
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2 I declare under oath that I have personally accomplishe	d this Personal Data Sheet which is a t	rue, correct and			
2 I declare under oath that I have personally accomplished complete statement pursuant to the provisions of pertir	nent laws rules and regulations of the	Republic of the			
Obilinatings I authorize the agency head/authorized represe	entative to verify/validate the contents state	ed nerein. I KIMRERIY VIDALAY			
agree that any misrepresentation made in this docu	ument and its attachments shall caus	se the filing of			
administrative/criminal case/s against me.					
administrative of minical costs against me.					
Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)	21-1				
PLEASE INDICATE ID Number and Date of Issuance	YAW				
Government Issued ID: PHIL-HEALTH	000				
ID/License/Passport No.: 13-250468858-9	Signature (Sign inside the t				
Date/Place of Issuance: TACLOBAN CITY	Date Accomplished	Right Thumbmark			
SUBSCRIBED AND SWORN to before me this	, affiant exhibit	ing his/her validly issued government ID as indicated above.			
	Person Administering Oa	th			