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 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. (Do not fill up. For CSC use only 2. SURNAME **PONTECILLA** NAME EXTENSION (JR., SR) FIRST NAME JANINE IVY MIDDLE NAME **DELA CRUZ** 3. DATE OF BIRTH 4/3/1999 16. CITIZENSHIP ■ Dual Citizenship (mm/dd/yyyy) ☐ by birth ■ by naturalization CALBAYOG CITY, SAMAR If holder of dual citizenship. Pls. indicate country: 4. PLACE OF BIRTH please indicate the details. 5. SEX ■ Male ☑ Female 17. RESIDENTIAL ADDRESS PUROK 1 HIGHWAY ☑ Single ■ Married 6 CIVIL STATUS House/Block/Lot No. ■ Widowed □ Separated ALTA VISTA N/A ☐ Other/s: ORMOC CITY LEYTE 7. HEIGHT (m) 1.61 City/iviunicipality Province 58 6541 8. WEIGHT (kg) 7IP CODE PUROK 1 HIGHWAY 18. PERMANENT ADDRESS 9. BLOOD TYPE TYPE O House/Block/Lot No ALTA VISTA N/A 10. GSIS ID NO. N/A Supaivision/village ваrangay ORMOC CITY LEYTE 11. PAG-IBIG ID NO. 121255442520 City/Municipality 12. PHILHEALTH NO. 12-025842038-7 ZIP CODE 6541 13. SSS NO. 06-4333762-2 19. TELEPHONE NO. N/A 14. TIN NO. N/A 09385009386 / 09174264072 20. MOBILE NO. 15. AGENCY EMPLOYEE NO. N/A janine.pontecilla@vsu.edu.ph 21. E-MAIL ADDRESS (if any) 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) NAME EXTENSION (JR., SR) FIRST NAME N/A N/A N/A MIDDLE NAME N/A OCCUPATION N/A EMPLOYER/BUSINESS NAME N/A BUSINESS ADDRESS N/A TELEPHONE NO. N/A BAYRON 24. FATHER'S SURNAME NAME EXTENSION (JR., SR) FIRST NAME RENANTE MIDDLE NAME **IMPAS ENCARNACION PONTECILLA** 25. MOTHER'S MAIDEN NAME SURNAME **PONTECILLA**

FIRST NAME	ENCARNACION								
MIDDLE NAME	DELA CRUZ				(Continue on separate sheet if necessary)				
III. EDUCATIONAL BACKGE	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	То			RECEIVED	
ELEMENTARY	TAMBULILID ELEMENTARY SCHOOL	BASIC EDUCAT	6/10/2008	4/8/2011	N/A	2011	SALUTATORIAN		
SECONDARY	NEW ORMOC CITY NATIONAL HIGH SCHOOL	BASIC EDUCATION		6/6/2011	3/27/2015	N/A	2015	GRADUATE	
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN AGRICULTURE (SOIL SCIENCE)		6/8/2015	6/14/2019	N/A	2019	DOST-SEI SCHOLAR	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF SCIENCE IN SOIL SCIENCE		10/52020	1/8/2024	N/A	2024	DOST- ASTHRDP	
(Continue on separate sheet if necessary)									
SIGNATURE				DATE					

IV CIVII SI	FRVICE EI IGI	IBII ITY							
	CIVIL SERVICE ELIGIBILITY CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER DATING DATE OF				LICENSE (if ap	oplicable)			
SPECIAL LAWS/ CES/ CSEE RATING			(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			NUMBER	Date of Validity
CAREER SERVICE PROFESSIONAL EXAMINATION 87.19			8/20/2023	TACLOBAN CITY			N/A	N/A	
	RA 1080 (AGRICULTURE) 81.17			11/20-22/2023	TACLOBAN CITY			N/A	N/A
V WORK	EXPERIENCE		(Co	ntinue on separate sheet	if necessary)				
		nt. Start from your recent	t work) Description	of duties should be	indicated in the attached	Work Expe			
(n	USIVE DATES nm/dd/yyyy)	POSITION T (Write in full/Do not			ENCY / OFFICE / COMPANY	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0")/	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/N)
From 10/5/2022	To 3/5/2021	GRADUATE TEACHIN	IG ASSISTANT	DEPARTMENT	F OF SOIL SCIENCE,	9000.00	INCREMENT N/A	CONTRACTUAL	N
1/7/2020	5/15/2020	JOB ORD		CITY FISHERIE	TATE UNIVERSITY S MANAGEMENT AND ITY AGRICULTURE OFFICE	6000.00	N/A	CASUAL	Y
7/29/2019	10/19/2019	ADVISOR I, CUSTON	MER SERVICE		VG PHILIPPINES, INC.	18000.00	N/A	PERMANENT	N
SICA	IATURE		(60	nnunue on separate sneet					
SIGN	IATUKE				DATE			S FORM 212 (Revised 20	

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S						
29. NAME & ADDRESS OF O (Write in ful	RGANIZATION I)	INCLUSIV (mm/c	/E DATES dd/yyyy) To	NUMBER OF HOURS	POSITION / NATURE OF WORK	
N/A		N/A	N/A	N/A		N/A
VII. LEARNING AND DEVELOPMENT (L&D)		ntinue on separate		")		
(Start from the most recent L&D/training program and include				f/Executive/Manage	rial positions)	
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) From To		NUMBER OF HOURS	Type of LD (Managerial/ CONDUCTED/ SPONSORED BY Supervisory/ (Write in full) Technical(etc)	
N/A		N/A	N/A	N/A	N/A	N/A
		<u> </u>				
VIII. OTHER INFORMATION	(Co	ntinue on separate	sneet ii necessary	<u>'</u>		
31. SPECIAL SKILLS and HOBBIES	NON-ACADEMIC DISTINCTIONS / RECOGNITION 32. (Write in full)					33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
GEOGRAPHIC INFORMATION SYSTEM	N/A					N/A
COMPUTER SKILLS						
TEACHING	1					
LABORATORY SKILLS						
SIGNATURE	(Co	ntinue on separate	sheet if necessary		ATE	

34.	Are you related by consanguinity or affinity to the appointing or chief of bureau or office or to the person who has immediate s						
	Bureau or Department where you will be apppointed, a. within the third degree?		F. 170				
			YES	☑ NO			
	b. within the fourth degree (for Local Government Unit - Caree	er Employees)?	☐ YES ☑ NO				
		If YES, give details	S:				
35.	a. Have you ever been found guilty of any administrative offen	☐ YES	☑ NO				
	, , ,	If YES, give details:					
	b. Have you been criminally charged before any court?		☐ YES ☑ NO If YES, give details:				
		Date Filed:					
		Status of Case/s:					
36.	Have you ever been convicted of any crime or violation of any	law, decree, ordinance or regulation by	☐ YES ☑ NO				
00.	any court or tribunal?	, ,	If YES, give details:				
37	Have you ever been separated from the service in any of the f	ollowing modes: resignation, retirement					
51.	dropped from the rolls, dismissal, termination, end of term, fini-		☑ YES ☐ NO If YES, give details: RESIGNATION				
	the public or private sector?	,					
38.	a. Have you ever been a candidate in a national or local election	on held within the last year (except	☐ YES ☑ NO				
	Barangay election)?		If YES, give deta				
	b. Have you resigned from the government service during the	three (3)-month period before the last	☐ YES ☑ NO				
	election to promote/actively campaign for a national or local		If YES, give details:				
39.	Have you acquired the status of an immigrant or permanent re	esident of another country?					
		If YES, give details (country):					
40.	Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna						
	and (c) Solo Parents Welfare Act of 2000 (RA 8972), please						
a.	Are you a member of any indigenous group?		☐ YES ☑ NO				
b.	Are you a person with disability?		If YES, please specify: ☐ YES ☐ NO				
υ.	Are you a person with disability:	If YES, please specify ID No:					
c.	Are you a solo parent?						
			If YES, please specify ID No:				
41.	REFERENCES (Person not related by consanguinity or affinity to applicant //	appointee)					
	NAME	ADDRESS	TEL. NO.				
	DR. BEATRIZ C. JADINA	VISAYAS STATE UNIVERSITY	N/A				
	DR. VICTOR B. ASIO	WOAVAO OTATE UNIVERDITY	N/A				
<u> </u>	DR. VICTOR B. ASIO	VISAYAS STATE UNIVERSITY	N/A				
	DR. SUZETTE B. LINA	VISAYAS STATE UNIVERSITY	N/A				
42.	I declare under oath that I have personally accomplished this		•	Jantaille.			
	statement pursuant to the provisions of pertinent laws, ru authorize the agency head/authorized representative to ve			JANINE TVY D. PONTEGLIA			
	misrepresentation made in this document and its attachme		PHOTO				
	against me.						
T				: I			
	overnment Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) LEASE INDICATE ID Number and Date of Issuance	1					
	overnment Issued ID: DRIVER'S LICENSE						
ΙH	/License/Passport No.: H08-22-303292						
l ⊩		0024					
D	ate/Place of Issuance: NOVEMBER 3, 2022/CALBAYOG CITY	Right Thumbmark					
	CURCOURED AND CWOODN to before me this	og his/hor validly issued	government ID as indicated obesis				
SUBSCRIBED AND SWORN to before me this, affiant exhibiting his/her validly issued government ID as indicated above.							
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